FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

% RAFAEL A. PUIG



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J27031

RAFAEL A. PUIG, M.D., P.A.

(0)

Mailing Address

% RAFAEL A. PUIG

FILED May 13 1997 8:00am Secretary of State



1208 SE 17TH ST OCALA FL 32671			1208 SE 17TH ST OCALA FL 34471-4508					
						3. Date Incorporated or Qualified 07/29/1986 3a. Date of Last Report 02/26/1996		
Principal Place of Business The Principal Place of Business			2a. Mailing Address 26 RAFAEL	2a. Mailing Address 26 RAFAEL A. Pui4		4. FEI Number 59-2697946		olied For Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc. 27 P.O. BC			5. Certificate of Status Desired	□ \$8.75 A Fee Red	
City & State) 		City & State 28 OCACA	FL		Election Campaign Financing Trust Fund Contribution	\$5.00 i	
24 344 T		Country 25	2934478	Country 30 C)SA.		Yes 🗌 No	199.032,
D) II/			rent Registered Agent		T Mana	10. Name and Address of New Re	gistered Agent	
	3, rafael 3 se 17t <u>h</u>			61	81 Name			
	LA FL(326			, 82 Street Add		ress (P.O. Box Number is Not Acceptable)		
,				83				
				84	City		FL 85 Zip C	ode /
agent. I an	əgistered aç n familiar w	jent, or boin, in the St	ate of Florida. Such change was ligations of, Section 607.0505, I	s authorized b Florida Statute	v the corporati	oration submits this statement for the p on's board of directors. I hereby accep	urpose of changing its	registered egistered
12.		OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		IN 12
TITLE	P SHO BISASI A		☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	PUIG, RA	VEALL A.		1.2 NAME				
STREET ADDRESS		17TH ST		1.3 STHEE	I ADDRESS			
CITY-ST-ZIP	OCALA f	<u>'L</u>		1.4 CITY-5	ST-ZIP			
TITLE			DELETE	2.1 NTLE			Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET				
CITY-ST-ZIP TITLE			DELETE	2. 1 CHY- 3.1 TITLE	ST-ZIP		Change	T Azzetta
NAME				3.2 NAME			L. Change	L. Addition
STREET ADDRESS				3.3 STREET	I ADODECĆ			
CITY-ST-ZIP				3.4 CITY-				
TITLE			DELETE	4.1 7171.6	31-211		Change	Addition
NAME				4. 2 NAME			_ ,	
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY - 5	ST-ZIP			
TITLE			☐ DELETE	5.1 TITLE			Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				53 STREET	ADDRESS			
CITY-ST-ZIP				54 CITY- 8	ST - ZIP			
TITLE			L_ DELETE	6 1 TITLE			Change	Addition
NAME OTDEST ARRESTO				6.2 NAME				
STREET ADDRESS				6.3 STREET	·			
City-St-ZiP	v cartify the	t the information cuso	and with this filing done and win	64 Cily-8	mation states	in Section 119.07(3)(i), Florida Statules	16.46.0.60	
information I am an off appears in	i Indicated of licer or direct Block 12 o	on this annual report of ctor of the corner (b) r Block 13 if ckan led	r supplemental annual report or the receiver or trustee/embers on an attachment with an ac-	true and acci wered to acci ddress.	urate and that i	mr section 19.07(3)(i), riting a statutes my signature shall have the same legal as required by Chapter 607, Florida Si	effect as if made undi latutes; and that my na	er oath; th