FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 PROFIT FLORIDA DEPARTMENT OF ST

PROFIT CORPORATION ANNUAL REPORT

JAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J53643

(9)

PEREZ & PEREZ, M.D.'S, P.A.

FILED								
Jun 16 1997 8:00am								
Secretary of State								

1012 / 201 127

Principal Plac % BERNARD F 4504 WISHART TAMPA FL 330	r. Perez I Place	Mailing Address S BERNARD R. PEREZ 4504 WISHART PLACE TAMPA FL 33603-2724			3. Date incorporated or Qualified 3a. Date of Last Report				
						01/19/1987	04/0	05/1996	
! -	lace of Business	2a. Mailing Address				4. FEI Number		-	pplied For
Suite, Apt.	# atc	Suite, Apt. #, etc.				59-2758186			ot Applicable Additional
22	π ₁ 0 (0.	27				5. Certificate of Status Desired			Additional equired
City & State	8	City & State				6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution			to Fees
Zip ├─	Country	Zip	Count	try		8. This corporation has liability for		-	. 199.032
24	25] 9. Name and Address of Curr		30			Florida Statutes 2 10. Name and Address of New Re		J No J Cont	
DED	REZ-BERNARD R.	ent Hogistered Agent	6	31 N	lame	IV. Halle and Address Of Hew He	Bistelen S	(Boin	
	4 WISHART PLACE							_	
	/PA FL 33803-9724			32 S	treet Võõi	ress (P.Q. Box Number is Not Acceptate	ole)		
	14		8	33				· · · · · · · · · · · · · · · · · · ·	
			8	34 C	itv			85 Zip	Code
*! 					•		FL	11	- 1
office or r agent I a SIGNATURE	egistered agent, or both, in the sta im familiar with, and accept the obli-	<u>e</u>				poration submits this statement for the plion's board of directors. I hereby accepted when reinstating)	of the appo	pintment as	registered
12.		ND DIRECTORS	13.			ADD/TIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	3S IN 12
TITLE	PST	☐ DELETE	1.1 TITLE	Ē	-			☐ Change	Addition
NAME	PEREZ, BERNARD R.		1.2 NAM		1				
STREET ADDRESS	4504 WISHART PLACE TAMPA FL		1.3 STRE						
CITY-ST-ZIP TITLE	VP TOWNER TO	DELETE	2.1 TITLE		P	· ;		Change	Addition
NAME	PEREZ, DON J		2.2 NAM					onlings	I HOURT
STREET ADORESS	4504 WISHART PLACE		2.3 STRE		RESS				
CITY-ST-ZIP	TAMPA FL 33603		2. 4 CITY		1				
TITLE		DELETE	3.1 TITLE	E				Change	Addition
NAME			3.2 NAM	ΙE	1				
STREET ADDRESS			3.3 STRE			·			
CITY-ST-ZIP TITLE		DELETE	3.4. CiTY		IP			Change	Addition
NAME		FT presit	4.1 TITLE 4 2 NAM					orange	الماليانية ب
STREET ADDRESS			4 3 STHE		BESS	•			;
CITY-ST-ZIP			4.4 CITY		i				
TITLE		DELETE	5.1 TITLE	****			7,	Change	Addition
NAME			5.2 NAM	1E			// /	//	/
STREET ADDRESS			5.3 STRE	ET ADD	RESS	\leq_{b}	F) (1	0[//	1/2
CITY-ST-ZIP			5.4 CITY		P	/(1100	
TITLE		☐ DELETE	6.1 TITLE			,	'	L_J Change-	Addition
NAME EXPERT ADDRESS			6.2 NAM		pr.co.				,
STREET ADDRESS	L.		6.3 STRE		· I		ره هي	D- A	11,000
CITY-ST-ZIP	by certify that the information suppli	ed with this filing does not qualif	6.4 City y for the ex	xemp	ion stated	d in Section 119.07(3)(i), Florida Statute	s. I further	certify that	/65
informatio I am an oi	in indicated on this annual report or	supplemental annual report is troit to the seceiver or trustee empow	ue and ac- ered to exe	curate	e and that	my signature shall have the same legart as required by Chapter 607, Florida S	l effect as	if made un	der oath; that name