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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J92540

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Apr 28 1997 8:00am
Secretary of State

JOHN J. FAVATA, SR.,M.D.,P.A.  Principal Place of Business Mailing Address  3865 NORTHDALE BLVD 3865 NORTHDALE BLVD										
3865 NORTHDALE BLVD TAMPA FL 33624  TAMPA FL 33624-1841										
							3. Date Incorporated or Qualified 09/11/1987		te of Last F <b>0/1996</b>	Report
2. Principal F	Place of Business	26. Ma	ailing Address				4. FEI Number 59-2868341			pplied For ot Applicable
Suite, Apt	#, etc.		Suite, Apt. #, etc.				5. Certificate of Stalus Desired		60 7E	
City & Stat	le		ly & State			<del> </del>	6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution			to Fees
Zip <b>24</b>	Country 25	Z (29)	p	<b>30</b>	ntry		This corporation has liability for in Florida Statutes	ntangible Yes		s. 199.032,
	9. Name and Address o		ed Agent				10. Name and Address of New Re	gistered A	gent	
	ATA, JOHN J., SR.				81	Name				
	5 North Dale BLVD IPA FL 33624-1840				82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
I PANI	IFA FL 33024-1040				83					
					84	City			85 Zip	Code
						•		FL		
office or i agent if a	to the previsions of Sections registered agent, or both, in t am familiar with, and accept t	: 607.0502 and 607.1 the State of Florida. : the obligations of, Se	1508, Florida Stati Such change was ection 607.0505. F	utes, the al s authorize Florida Stat	oove- d by t utes	named corp the corporati	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of it the appo	changing i bintment as	ts registered registered
SIGNATURE	and the trial, and accept t	and disignations of or	000001 007.0000, 1	ionou ota	arou.					
,	Signature, typed or printed name of rec				l Ageni	l signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE	DIOCOTO	55.41.45
12.		ERS AND DIRECTO	JHS	13.					1 10 0 1 1 1 1 1	85 IN 12
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	D FAVATA, JOHN J., SR. 3865 NORTHDALE BLVI	D	DELETE	1.2 N	ME	ADORESS	ADDITION OF TAXABLE TO OF TAX			
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NAME STREET ADORESS CITY-ST-ZIP TITLE	FAVATA, JOHN J., SR. 3865 NORTHDALE BLVI	<b>D</b>	DELETE	1.2 No 1.3 ST 1.4 GI 2.1 TI	ime Reet a Ty-st- Tle	· · · · · · · · · · · · · · · · · · ·	ADDITIONAÇÃO PARALLO TO OTITO			
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nnual report is true and accurate and that my signature shall have the same legal effect as if made under oath; r trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name nent with an address.

812 960 4401