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Jan 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J92777 (8)

1. Corporation Name

FORT LAUDERDALE RENAL ASSOCIATES, INC.

Principal Place of Business

% HUMBERTO J. ANICAMA
6264 NORTH FEDERAL HIGHWAY
FT LAUDERDALE FL 33308

Mailing Address

% HUMBERTO J. ANICAMA
6264 NORTH FEDERAL HIGHWAY
FT LAUDERDALE FL 33308-1804



3. Date Incorporated or Qualified
09/14/1987

3a. Date of Last Report
02/27/1996

4. FEI Number

65-0003683

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

ANICAMA, HUMBERTO J.
6264 N FEDERAL HWY
FT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME ANICAMA, HUMBERTO J.
STREET ADDRESS 6264 N FEDERAL HWY
CITY-ST-ZIP FT LAUDERDALE FL

TITLE DVP
NAME LAZAR, IRA
STREET ADDRESS 6264 N FEDERAL HWY.
CITY-ST-ZIP FT LAUDERDALE FL

TITLE DS
NAME ASHWIN, PATEL
STREET ADDRESS 6264 N FEDERAL HWY.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/97 (954)-776-3791

CR2E034 (9/96)