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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90097 019 ***150.00

DOCUMENT # K03671

SERRA MEDICAL GROUP, P.A.

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Principal Place of Business Mailing Address							
TIN DOWNS BLVD AVENUE 34990	2720 SW MARTIN DOWNS BLVD 306 HOSPITAL AVENUE PALM CITY FL 34990 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/24/1987			
Place of Business	2a. Mailing Address			4. FEI Number		<u> </u>	pplied For
		EOLA.	ST.	<u>65-0013307</u>			ot Applicable
#, etc. TE 106		06		5. Certifcate of Status Desired			Additional equired
te	City & State		ļ	6. Election Campaign Financing	П		Мау Ве
ART FL	28 STUART,	FL,	•	Trust Fund Contribution			to Fees
	, ,	1146	ĺ		ent year in		□No
<u></u>		1 7 5			teaistered	<u> </u>	
V. Haille and Address of Current	trediatores vident	81 Nam			<u> </u>		 ,
ira, Juan J.			- A A -1 -1	(D.O. Day Nivers in New Accounts	hla)		
2720 SW MARTIN DOWNS BLVD			et Address	S (P.O. BOX Number IS NOT Accepta	ibie)		
PALM CITY FL 34990		83					
-		84 City			FL	85 Zip	Code
to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-name	ed corpora	tion submits this statement for the	nurpose of	changing it	s registered
registered agent, or both, in the State of	of Florida. Such change was autho	orized by the co-	rporation's	s board of directors. I hereby accer	it the appo	intment as r	egisterea
Charters to ad as printed some of registered agent	and title (applicable /NOTE: Rec	nistered Agent signatur	re required wh	nen reinstatinn)	DATE		
		13.				ND DIRECT	ORS IN 12
DP	☐ DELETÉ	1.1 TITLE				☐ Change	Addition
SERRA, JUAN J.	1	1.2 NAME					
1870 SW CRANE CREEK AVE		1.3 STREET ADDRES	ss				
PALM CITY FL 34990		1.4 CITY-ST-ZIP	J	.			
D	☐ DELETE	2.1 TITLE	_]			Change	☐ Addition
SEERA, JOSE E.		2.2 NAME					
4732 SW BRANCH TERRACE		2.3 STREET ADDRES	ss				
PALM CITY FL 34990		2. 4 CITY-ST-ZIP					6.3484
1	☐ DELETE	3.1 TITLE	1			∟∟cnange	☐ Addition
		3.2 NAME					
			SS				
<u> </u>	[] NEI ETE	3.4. CITY-ST-ZIP				Change	Addition
	☐ DEFE4E		1			Sublige	
		4. Z NAME					
5		4.2 CYDECT ADDOC	ee!				
T. Control of the Con			ss				
 	□ DELETE	4.4 CITY-ST-ZIP	ss			☐ Change	Addition
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	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME			77 4 %		
5	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRES		saa ah ilaa sa s	77.43		
5		4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRES 5.4 CITY-ST-ZIP		esta sitta (il antico este control	7.77 + 3.	9 4 V	
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	Place of Business S. E. O. S. C. E. O. S. T. E. C. S. T. E. C. S. T. E. C. Country #, etc. T. E. C. C. C. E. C. L. A. S. T. E. C. Country 9. Name and Address of Current RA, JUAN J. O. SW MARTIN DOWNS BLVD M CITY FL 34990 Ito the provisions of Sections 607.0502 In the provision	TIN DOWNS BLVD AVENUE 34990 Place of Business S.E.OSCEOLA ST 26 369 S.E.OSC #, etc. TE / OG Te Country Country Country PAM CITY FL 34990 9. Name and Address of Current Registered Agent RA. JUAN J. D SW MARTIN DOWNS BLVD M CITY FL 34990 It to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, registered agent, or both, in the State of Florida. Such change was authern familiar with, and accept the obligations of, Section 607.0505, Florida Stignature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS DP SERRA, JUAN J. 1870 SW CRANE CREEK AVE PALM CITY FL 34990 D DELETE SEERA, JOSE E. 4732 SW BRANCH TERRACE PALM CITY FL 34990 DELETE	TIN DOWNS BLVD AVENUE 34990 AVENUE 34990 Blace of Business 2a. Mailing Address 2b. E. OSCEOLA.ST 2b. Bute. Suite, Apt. #. etc. 2c. Suite, A	TIN DOWNS BLVD AVENUE 306 HOSPITAL AVENUE PALM CITY FL 34990 US Place of Business 2a. Mailing Address 5. F. O 5 C F O L A 5 T 26 3 D 9 5. F. O 5 C F O L A 5 T. #. etc. TE / O 6 City & State ART FL 28 ST U A RT FL . Country Zip Country Zip Country 3. Name and Address of Current Registered Agent B1 Name RA, JUAN J. D SW MARTIN DOWNS BLVD M CITY FL 34990 B2 Street Address Stgristure, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS DP SERRA, JUAN J. 1870 SW CRANE CREEK AVE PALM CITY FL 34990 D DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP D DELETE 2.1 TITLE 2.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3. STREET A	Mailing Address Mailing Addres	Mailing Address Mailing Address 273 SW MARTIN DOWNS BLVD AVENUE 34990 PALM CITY FL 34990 DO NOT WRITE IN THIS 3. Date incorporated or Qualified 11/24/1987 4. FEI Number 65-0013307 5. Certificate of Status Desired FE (O G	Mailing Address Mailing Address J270 SW MARTIN DOWNS BLVD NS HOSPITAL AVENUE PALM CITY FL 34990 US 3. Date Incorporated or Qualified 11/24/1987 4. FEI Number A 55 LO 5 C E OLA 5 7 26 3 0.9 S L OS C E OLA 5 7 65 0013307 8. etc. City & State City & State Country Country Country J2p

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

TORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/99 56/-220-2252

CR2E034 (11/98)