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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # K39387

(1)JEFFREY C. HAMM, M.D., F.A.C.S., P.A.

FILED Feb 27 1997 8:00am Secretary of State



Principal Place of Business \$900 HOLLYWOOD BLVD. SUITE 304 HOLLYWOOD FL 33021		Mailing Address 3900 HOLLYWOOD BLVD. SUITE 304 HOLLYWOOD FL 33021-6732		3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1996			
Principa Place of Business 21		2a. Mailing Address		4, FEI Number 65-0077182	Applied For Not Applicable		
Suite, Apr. #. etc 22		Suite, Apr #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State 23		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	7(p)	Gountr 30	у	This corporation has liability for it Florida Statutes	ntangible tax u Yes \(\sime\) No	
24	25 g. Name and Address of Current		1301		10. Name and Address of New Reg	T	
u,		negistered Agent	81	Name	IV. Hallie and Address of New Nes	latered Agen	
	HAMM, JEFFREY C.			Harrie			
	UITE 304		82 Street Ad		Idress (P.O. Box Number is Not Acceptable)		
	000 HOLLYWOOD BLVD.			ļ			
H	OLLYWOOD FL 33021		83	·			
			84	City		FL 65	Zip Code
SIGNATUR 12. TILE	Stg. stars, typester protections of any level agent OFFICERS AND DPS		13.	ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC		ECTORS IN 12 hange
NAME STREET ADDRES ONLY ST-ZIE	HOLLYWOOD FL		1.2 NAME 1.3 STREE 1.4 CITY -	T ADDRESS ST-ZIP			<u>.</u>
TITLE INAME STREET ADDRES		☐ DELETE	2 1 TITLE 2 2 NAME 2.3 STREE	T ADDRESS		c	hange [_] Additio
C-TY-ST-7IP	HOLLYWOOD FL		2. 4 CITY-	ST-ZIP			
TIFLE	V CHAPTOTTE W	DETELE	3.1 TITLE				hange [Addition
NAME	HAMM, CHARLOTTE W.		3.2 NAME				
S-REET ADDRES	3900 HOLLYWOOD BLV #304		3 3 STREE	T ADORESS			
CHTY - \$1 - 76"	HOLLYWOOD FL		3 4. CITY	ST-ZIP			
TifuE		☐ DELETE	4 1 TITLE			□ 0	hange 🔲 Additio
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CITY-S1-Z0F			4.4 CITY-	ST-ZIP			
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NAME		*****	5.2 NAME				
STELL* ADDRES	96			T ADDRESS			
				j			
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THE		ביין הכנכוב	1			<u>, , , , , , , , , , , , , , , , , , , </u>	umudo 🗀 voquo
NAM:			6.2 NAME				
STREET ADDRES	72		6.3 STREE	T ADDRESS			
CHY - \$1 - 74P	į		6.4 CITY-	ST-ZIP			

14. I do hereby or 1/y 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 13/1 chapter 607, priority and attachment with an address. Lam an officer or director of the corpo-appears in Block 12 or Block 13/1 cha

SIGNATURE:

NO TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR