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

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

FILED
Feb 04 1998 8:00am
Secretary of State

	SANDL	er burk	LEY, O.D., P.A.											
Principal Place of Business Mailing Address										1 (40101) 811 9101 6		4001 01011 E10		
5:	20 COCONI	IT CREEK P.	ARKWAY	64	8 EMERALD WAY	WEST								
5230 COCONUT CREEK PARKWAY 668 EMERALD WAY WEST MARGATE FL 33063 DEERFIELD BCH FL 33442										5	O MOTAMBI	TE 154 T1 110	CDAOE	
US US											O NOT WRI		SPACE	
										3. Date incorporated	or Qualmed	a		
2. Principal Place of Business					2a. Mailing Address					10/21/1988 4. FEI Number				Annied For
21	_				26									Applied For Not Applicable
21	Suite, Apt. #, etc.				Suite, Apt. #, etc.					65-0083007				Additional
22					27					5. Certificate of Statu	is Desired		T	Required
City & State				- ''	City & State					6. Election Campaign	n Financing	•	\$5.0	O May Be
23				28	28					Trust Fund Contrib	_			d to Fees
	Zip		Country		Zip		untry	,		8. This corporation of	wes or has j	paid the cu	ırrent year I	ntangible
24			25	29		30				Personal Property				No No
		g, Name	and Address of Curre	ent Regist	tered Agent		ļ.,			10. Name and Addre	ss of New F	Registered	Agent	
1	BU	RKLEY, SA	NDLER L., O.D.				81	Name (2,,,,	ekleu . Can	Alex	4. 0	20	
1	231	04-4 ISLAI	NDVIEW				82	Street Ac	ddress	s (P.O. Box Number is	Not Accept	lable)	·	
1	80	CA RATON	I FL 334 33				Ш	حاجا	8	Emerald	Way	Wes	4	
							83				· /			
							84	Sitv		1/5			85 Zig	Code,
<u> </u>							1 1	Deer	ctio	eld Beach		<u> </u>	_ 3`	3442
11.	Pursuant I	to the provis	ions of Sections 607.05 jent, or both, in the Sta	502 and 60 te of Floric	07.1508, Florida \$ t la. Such change w	atutes, the a	boye d by	e-named corno	corpora	ation submits this state	ment for the	e purpose o	of changing	its registered
	agent. I a	m fa miliar w	th, and accept the obli	gations of	Section 607.0505	, Florida Sta	tutes	3.	JI GUIGI 1	bodio of directors. I	noreby acc	opi ii o up	pomimorit	is registored
SIC	SNATURE							· · · · · · · · · · · · · · · · · · ·						
40		Signature, typed	or printed name of registered a			(NOTE: Registere	d Age	nt signature re	equired •	- -	CEC TO OF	DATE	IN DIDECTO	NOC IN 40
12.		D	OFFICERS A	ND DIREC	DFLETE	13. 1.1 T	ITI E		··	ADDITIONS/CHANG	aes TO OFF	-ICERS AN	Change	
NAX		_	Y, SANDLER O			1.2 N								
	EET ADDRESS		ERALD WAY WEST					ADDRESS						
	- ST-ZIP		ELD BEACH FL				ITY-S							
TITL		VL-LIII II	-ED DENOTTE	· · · · · · · · · · · · · · · · · · ·	DELETE	2.1 I		1-21					☐ Change	Addition
NAN	1					2.2 N							_ ,	_
	EET ADDRESS							ADDRESS						
	r-ST-ZIP		F.					ST - ZIP						
TITL					☐ DELETE	3.1 1		/		· _ · · · · · · · · · · · · · · · · · ·	.,	• • • • • •	☐ Change	☐ Addition
NAS	i					3.2 N							·	
	EET ADDRESS							ADDRESS						
	r-ST-ZIP						CITY-S							
TITL					☐ DELET e	4.1 T					-		☐ Change	Addition
NAM	E					4.28	IAME							
	EET ADDRESS							ADDRESS						
	-ST-ZIP					4.4 C	TY-S1	T-ZIP						
TITL		_			DELETE	5.1 7				· · · · · · · · · · · · · · · · · · ·			Change	Addition
NAN	IE					5.2 N	AME							
	EET ADDRESS					5.3 S	TREET.	ADDRESS						
	-ST-ZIP						ITY-\$1							
TITL					☐ DELETE	6.1 1							Change	Addition
NAM	IE					6.2 N	AME							
STA	EET ADORESS					6.3 S	TREET	ADDRESS						
								T-ZiP						

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 13 if changed, or on an attachment with an address