ANNUAL REPORT	FLORIDA DEPAR Katherir Secretan	\$550.00 TMENT OF STATE THE Harris (of State ORPORATIONS	FILED Mar 16, 1999 8:00 am Secretary of State 03-16-1999 90101 003 ***150.00	
OCUMENT # K494	43			
Zakia R. Subhani, M.D, P.A.				
rincipal Place of Business	Mailing Address			AL BUBLE BERKE BUBLE BEBER FORM
0051 PINES BLVD. 10051 PINES BLVD. UITE A SUITE A EMBROKE PINES FL 33024-6136 PEMBROKE PINES FL 33024-6136		DO NOT WRITE IN TH		
		H0136	3. Date Incorporated or Qualifed	
Principal Place of Business	2a. Mailing Address		12/06/1988 4. FEI Number	Applied For
	26		65-0087019	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	8. This corporation owes the current year	Intangible
25 9. Name and Address of C		30	Personal Property Tax. 10. Name and Address of New Registered	No ad Agent
Koprowski, Paul A.		81 Name		,
10031 PINES BLVD. #224		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
PEMBROKE PINES 33024		83		
		84 City	F	85 Zip Code
LE DP		Registered Agent signature requirent and the second	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
ME SUBHANI, ZAKIA R. REET ADDRESS 5340 S. SAXTON CIRCLE		1.2 NAME 1.3 STREET ADDRESS		~
TY-ST-ZIP FT. LAUDERDALE FL		1.4 CITY-ST-ZIP		Change C Addition
ILE ST ME SUBHANI, ZAKIA R REETADDRESS 5340 S. SAXTON CIRCLE		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		
IY-ST-ZIP FT. LAUDERDALE FL		2 4 CITY-ST-ZIP	······································	Change Addition
ME	_	3.2 NAME		
REET ADDRESS IY-ST-ZIP		3 3 STREET ADDRESS 3 4, CITY- ST-ZIP		
1E	DELETE	4.1 TITLE		Change Addition
ME		4 2 NAME 4.3 STREET ADDRESS		•
		4.4 CITY-ST-ZIP		
REET ADDRESS IY-ST-ZIP				Change Addition
REET ADDRESS IY-ST-ZIP ILE		5.1 TITLE 5.2 NAME		
REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS		5.2 NAME 5.3 STREET ADDRESS		
REET ADDRESS IY-ST-ZIP ILE ME		5.2 NAME		Change Addition
REET ADORESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP ILE ME		5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		
REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP LE		5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Zakia R. Subhani, President

Date Daytime Phone #