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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 27 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

<u></u>	1930								
ì	MENT # K55064 EL L. WEINBERGER, M.D., I								
	,					A CARRIERO BAN DOLEN BUAR ABORE ARIO	OROK OKOKI OKOKI	ELEK EKEN E	(O) (O(O) (OO)
Principal Plac	a of Rusinass	Mailing Address							
		-							
160 JFK DRIV SUITE 202	/E	160 JFK DRIVE Suite 202							
ATLANTIS FL 33462 US		ATLANTIS FL 33462 US				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified				
9 Principal P	lace of Business	2a. Mailing Address				01/01/1989 4. FEI Number			Applied For
21	idos di bosiliess	26 26				65-0087628			Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	~						Additional
22		27				5. Certificate of Status Desired			Required
City & Stat	е	City & State			6. Election Campaign Financing		\$5.0	0 May Be	
23		28		Trust Fund Contribution			d to Fees		
Zip	Country	Zφ	Coun	ıtry		8. This corporation owes or has			
24	9, Name and Address of Curren	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	30			Personal Property Tax due Ju			∐ No
	INBERGER, MICHAEL L M.D.	t uadistalan waalit		81	Name	10. Name and Address of New I	registered F	(Bent	
							 _		
) JRK DRIVE		[8	82	Street Add	fress (P.O. Box Number is Not Accept	table)		
	ite 202 Lantis fl. 33462		1	83					
All	LANTIS FL 33402			\perp					
			١	B4	City		FL	85 Zig	p Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed name of registered agent	ations of, Section 607.0505, Fit	orida Statul	ıtes.		poration submits this statement for the stion's board of directors. I hereby acc ared when reinstalling)	DATE	intment a	is registered
12.	OFFICERS AND	DIRECTORS	13.	13.		ADDITIONS/CHANGES TO OF	ICERS AND	DIRECTO	ORS IN 12
TITLE	D	DELETE	1.1 TITU	.€				Change	Addition
NAME	WEINBERGER, MICHAEL L.		1.2 NAM	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE					
STREET ADDRESS	160 JFK DR STE 202		1.3 STRE						
CITY-ST-ZIP	ATLANTIS FL	DELETE						Channe	Lateria
TITLE		E DECETE	- F		- 1			Change	Addition
NAME Street address			2.2 NAM	2.3 STREET ADDRESS					
CITY-ST-ZIP			2.4 City						
TITLE		DELETE	3.1 TITLE		- 211		~~	Change	Addition
NAME I			3.2 NAM	ИE	}				
STREET ADDRESS			3.3 STAE	EET A!	DDRESS				
CITY-ST-ZIP			3.4. CITY						
TITLE		DELETE		4.1 TITLE				☐ Change	Addition
NAME			4. 2 NAM	ΜE					
STREET ADDRESS			4.3 STRE	EET AC	DDRESS				
CITY-ST-ZIP			4.4 CITY	/- ST-	ZIP				·
TITLE		DELETE	5.1 TITLE		ĺ			Change	Addition
NAME			5.2 NAM		}				
STREET ADDRESS			5.3 STRE						
CITY-ST-ZIP		DELETE	5.4 CITY		ZIP			Chases	- I defition
TITLE		C DELETE	6.1 TITLE				i	☐ Change	Addition
NAME			62 NAM						
STREET ADDRESS			6.3 STRE	ZET AD	DDRESS				

14. I hereby certify that the information si indicated on this annual report of sup officer or director of the corporation of Block 12 or Block 13 if changing or or

exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath; that I am an this report as required by Chapter 607, Florida Statutes; and that my name appears in