

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 23 PM 2:50

DOCUMENT # L00462

(6)

1. Corporation Name

LINDA RUBIN D.V.M., P.A.

Principal Place of Business

Mailing Address

2905 CORRIE DRIVE
~~1596 LAWDALE CIRCLE~~
ORLANDO FL 32803
US

2905 CORRIE DRIVE
~~1596 LAWDALE CIRCLE~~
ORLANDO FL 32803
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/07/1989

3a. Date of Last Report

02/06/1996

4. FET Number

59-2946367

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 2905 CORRIE DRIVE

Suite, Apt. #, etc.

22

City & State

23 ORLANDO FL

Zip

24 32803

Country

25 USA

2a. Mailing Address

26 2905 CORRIE DRIVE

Suite, Apt. #, etc.

27

City & State

28 ORLANDO FL

Zip

29 32803

Country

30 USA

9. Name and Address of Current Registered Agent

RUBIN, LINDA J.
1596 LAWDALE CIRCLE
WINTER PARK FL 32792

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7000002250437--0

83

-07/29/97--01054--018

84 City

****165.00

****165.00

FL

85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

LINDA J. RUBIN

7/18/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME RUBIN, LINDA J.
STREET ADDRESS 1596 LAWDALE CIRCLE
CITY-ST-ZIP WINTER PARK FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

KWM

14. I do 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.

LINDA J. RUBIN

CR2E034 (4/97)