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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # RUTH HANNO, M.D., P.A.

(7)

FILED Feb 24 1998 8:00am Secretary of State



i in to partiao	C C. DOS. ICSS	Mailing Add	1000			•			
% Alan S. Gassman 13601 Bruce B. Downs Blvd. Suite 211 Tampa Fl 33613 US		% ALAN S. GASSMAN 13601 BRUCE B. DOWNS BLYD. SUITE 211 TAMPA FL 33613			DO NOT	WRITE IN THIS S	SPACE		
		US				3. Date Incorporated or Qua			
					_	12/05/1989			
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		A	oplied For
21 Suite And A ale		26				59-2978687			ot Applicable
Suite, Apt. #, etc.		<u></u> ⊢¬ ' '	Suite, Apt. #, etc.			5. Certificate of Status Desir	ed 🔲		Additional
City & State		27	City & State				-		equired
23		h1	28			Election Campaign Finance Trust Fund Contribution	oing 🗍		May Be
Zip	Country	Country 7ip		Country			-		to Fees
24	25	29	30	-, ·		This corporation owes or Personal Property Tax due			Tangible No
	9. Name and Address of Curre			1		10. Name and Address of N			
GA	SSMAN, ALAN S.			B1	Name			<u></u>	
1245 COURT STREET				82	Street Adv	dress (P.O. Box Number is Not Ac	contable)		
	ITE 102			[32	Sireer Mar	Gross (F.O. DOX NORIDGE IS NOT AC	optable)		
CL	EARWATER FL 34616			83			•		
				84	City			85 Zip	Code
				1	,		FL	11	
11. Pursuant to office or re	o the provisions of Sections 607.05 egistored agont, or both, in the Stat in familiar with, and accept the obli-	502 and 607.1508, Fite of Florida, Such c	lorida Statutes, hange was aud	the above	-named co	rporation submits this statement for	r the purpose of	changing it	ts registered
agent la	m familiar with, and accept the obli	gations of, Section (07.0505, Florid	la Statutes	S			A THE PARTY OF THE	. Ugiotoi Bu
SIGNATURE	Signature, typind or printed name of registered a	and the state of the ACM SECTION	ALCOY, P.						
12.		ND DIRECTORS	(NOTE: B	13.	m signature requ	uired when reinstating) ADDITIONS/CHANGES TO	DATE OFFICERS AND	DIRECTOR	RS IN 12
TITLE	D		DELETE	1.1 TITLE	1	Applitotojolikitaka 10		☐ Change	Addition
NAME	HANNO, RUTH			1.2 NAME					
STREET ADDRESS	13601 BRUCE B. DOWNS B	KLVD., STE. 211		1.3 STREET	ADDRESS				İ
CITY - ST - ZIP	TAMPA FL			1.4 CiTY-S	T-ZIP				
TITLE			DELETE	2.1 TITLE				Change	Addition
NAME				2.2 NAME					ļ
STREET ADDRESS				2.3 STREET	address				
CITY-ST-ZIP		-	I DELETE	2. 4 CITY - S	ST-ZIP				
TITLE		L) DELETE	3.1 TITLE				Change	Addition
NAME CORET ADDRESS				3.2 NAME					
STREET ADDRESS				3.3 STREET					
CITY-ST-ZIP TITLE			DELETE	3.4. CITY - S 4.1 TITLE	i - ZIP			Change	☐ Addition
NAME		h	,,	4.1 HILE 4.2 NAME				Crisings	- 400111011
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-S					
TITLE			DELETE	5.1 TITLE	· *"-			Change	Addition
NAME				5 2 NAME			•		-
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CITY-S	T-ZIP				
TITLE			DELETE	6.1 TITLE				Change	Addition
NAME				6.2 NAME					İ
STREET ADDRESS				6.3 STREET	address				
CITY-ST-ZIP				SACITY-S	r. 74D				

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 12 or Block 13 if changed, oppn an attachment with an address.