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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L35245

LUIS C. NAVAS, M.D.P.A.

Drineinal Plac	e of Business	Mailing Address			\$4()
'''					
i C/O LUIS C. N 8260 Flagler		C/O LUIS C. NAVAS 8260 W FLAGLER ST 2-J			
MAIMI FL 3314		MAIMI FL 33144		DO NOT WRITE IN THIS	SPACE
US	•	US		3. Date Incorporated or Qualifed	. ' i
				12/08/1989	· · · · · · · · · · · · · · · · · · ·
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	'Applied For
21 .		26		65-0168071	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22					
<u> </u>			6. Election Campaign Financing	\$5.00 May Be Added to Fées	
Zip	p Country Zip		Country	Trust Fund Contribution	
— ·		<u> </u>	30	 This corporation owes the current year Interpretation. 	angibie □Yes □No
24	9. Name and Address of Current		30	10. Name and Address of New Registered	
	The Hame and Address of Carren	Trogration 7 (gent	81 Name		
NAVAS, LUIS C.					
8260 W FLAGLER ST 2-J			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE 1-B			83		1. H. 12 H. 31
MIAMI FL 33144					16-11-11-11-11-11-11-11-11-11-11-11-11-1
			84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. 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		Registered Agent signature requi	i/ed when reinstating) DATE.	-77
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	NAVAS, LUIS C.		1.2 NAME	·	
STREET ADDRESS	8260 W FLAGLER ST 2-J	•	1.3 STREET ADDRESS		
CITY-ST-ZIP	MAIMI F	.	1.4 CITY-ST-ZIP		·
TITLE		□ DEFELE	2.1 TITLE	•	Change Addition
NAME			2.2 NAME		
STREET ADDRESS		•	2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE	Add the sign of the control of	. DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
CITY-ST-ZIP. ,,	The Contract of the Contract o		3.4. CITY-ST-ZIP		
TITLE "'`					
NAME		☐ DELETE	4.1 TITLE		Change Addition
STREET ADDRESS		DELETE	4.1 TITLE 4. 2 NAME		☐ Change ☐ Addition
			4.1 TITLE		☐ Change ☐ Addition
CITY-ST-ŹIP			4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		:
CITY-ST-ZIP			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
CITY-ST-ZIP TITLE NAME			4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST-ZIP 5.1 TITLE 5.2 NAME		:
CITY-ST-ZIP TITLE NAME STREET ADDRESS			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		:
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		:

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, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

FILED

Jan 26, 1999 8:00am

Secretary of State

01-26-1999 90037 046 ***150.00