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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(2)

HEIDI M. TAUSCHER, P.A.

Mailing Address

FILED Apr 23 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		a sadirāti nas astro reikt tibāt tibāt tāli āt	AND MARKE MURIL MOREL MARKE NAMER HAND
124 TANGELO CT	124 TANGELO CT			
MAITLAND FL 32751	MAITLAND FL 32751		DO NOT WRITE IN	THIS SPACE
			3. Date Incorporated or Qualified	THIS OF MOL
			03/19/1990	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
ท	26		59-3044123	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	27		b. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
3	28		Trust Fund Contribution L	Added to Fees
Zip Country	Ζφ	Country	8. This corporation owes or has paid t	— /
9, Name and Address of Curre		30	Personal Property Tax due June 30 10. Name and Address of New Regis	
TAUSCHER, HEIDI M.	an riegistores Agent	81 Name	10. Name and Address of New Negls	reten Whetir
124 TANGELO CT		Tida No		
MAITLAND FL 32751		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
MATILAND PL 32/51		83		
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.05	02 and 607 1508 Florida Statuto	se the above named cor	rogration authority this statement for the nurs	FL 65 240 Godd
office of registered agent, or both, in the State	e of Florida. Such change was a	uthorized by the corpora	ation's board of directors. I hereby accept the	ne appointment as registered
 agent. I am familiar with, and accept the oblig 	gations of, Section 607.0505, Flo	rida Statutes.		
•				
SIGNATURE	neut and trie if anolis able (NOTE	Flenislated Apont stocalure regi	ired when reinstaling)	DATE
SIGNATURE Signature, typed or pented name of registered ag	gent and tole if applicable (NOTE	Registered Agent signature requ		DATE S AND DIRECTORS IN 12
SIGNATURE Signature, typed or printed name of registered age 12. OFFICERS AN		Registered Agent signature required. 13. 1.1 TITLE	uired when reinstating) (ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
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