FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 31 PM 3:03

DOCUMENT # L65189 (7)

1. Corporation Name
MICHAEL ALLEN LANDMAN, DO, PA

Principal Place of Business	Mailing Address
1032 SW 9TH AVENUE BOCA RATON FL 33486	1032 SW 9TH AVENUE BOCA RATON FL 33486

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/11/1990
3a. Date of Last Report: 02/01/1994

2. Principal Place of Business
21 4623 Forrest Hill Blvd.
22 Suite, Apt. #, etc. Suite 105
23 City & State West Palm Bch., FL.
24 Zip 33415 25 Country USA

2a. Mailing Address
26 4623 Forrest Hill Blvd.
27 Suite, Apt. #, etc. Suite 105
28 City & State West Palm Bch., FL.
29 Zip 33415 30 Country USA

4. FEI Number: 65-0187074 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MICHAEL LANDMAN
1032 SW 9TH AVENUE
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81 Name: Michael Landman
82 Street Address (P.O. Box Number Is Not Acceptable): 4623 Forrest Hill Blvd.
83 Suite 105
84 City: West Palm Bch. FL 85 Zip Code: 33415

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: Michael Landman DATE: 1/21/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPV	1.1 TITLE	DPV	☒ Change ☐ Addition
NAME	LANDMAN, MICHAEL ALLEN	1.2 NAME	Landman, Michael Allen	
STREET ADDRESS	1032 SW 9TH AVENUE	1.3 STREET ADDRESS	19232 Redberry Court	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	Boca Raton, FL 33498	
TITLE	TS	2.1 TITLE	TS	☒ Change ☐ Addition
NAME	LANDMAN, MICHAEL ALLEN	2.2 NAME	Landman, Michael Allen	
STREET ADDRESS	1032 SW 9TH AVENUE	2.3 STREET ADDRESS	19232 Redberry Court	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	Boca Raton, FL 33498	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Michael Landman 1/21/95 407-969-9900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0278433 CP