

FILED  
Apr 14 1998 8:00am  
Secretary of State



1. Corporation Name  
**CARLOS G. LEVY, D.O., P.A.**

8606 ST. RD 84  
DAVIE FL 33324  
U.S.

**9. Name and Address of Current Registered Agent**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

81	Name	
82	Street Address (P.O. Box Number is Not Acceptable)	
83		
84	City	85 Zip Code

SIGNATURE

Signature, typed or printed name of telecaller, agent and title, if applicable

(NOTE: Registered Agent signature required when reinstalling)

DA1F

## OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

6.1 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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.

**SIGNATURE:**

changed, or on an attachment with an address.

*Josephine Levy*

4-7-98 (954) 384-2252

CR2E034 (10/97)