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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L80250

(8)

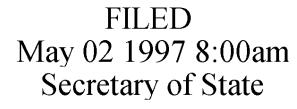
JEAN M. KERRY, PH.D., P.A.

Principal Place of Business

10030 NW 39TH CT

Mailing Address

10030 NW 39TH CT CORAL SPRINGS FL 33065-15.





CORAL SPRINGS FL 33065		CORAL SPRINGS FL 33065-1529							
				7		3. Date Incorporated or Qualified 06/14/1990		ate of La 01/199	st Report
2. Principal P	lace of Business	2a. Mailing Address				4, FEI Number	Y		Applied For
21		26				65-0203547			Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.7	5 Additional
22		27				b. Certificate of Status Desired	Ш	Fed	e Required
City & State	9	City & State				6. Election Campaign Financing		\$5.	00 May Be
23		28				Trust Fund Contribution			led to Fees
Zip	Country	Zip	Cour	niry		8. This corporation has liability for in	ntangible	tax und	er s. 199.032,
24	25	29	30	~ 7.8. // 6.] No	
	g. Name and Address of Curren	nt Registered Agent				10. Name and Address of New Reg	istered /	Agent	
KER	RY, JEAN M.		1	81	Name				
	30 NW 39TH CT			82	Street Addre	ss (P.O. Box Number is Not Acceptable	e)		
	RAL SPRINGS FL 33065					, , , , , , , , , , , , , , , , , , , ,	٠,		
				83					
			-	84	City			85	Zip Code
							<u> FL</u>	.	•
office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the obligi	of Florida. Such change was	authorized	i by t	the corporatio	ration submits this statement for the pi on's board of directors. I hereby accep	irpose of t the app	changir ointmen	ng its registered t as registered
SIGNATURE	Signature, typod or printed name of registered age		H Registered	Agent	r signature required	d when reinstating)	DATE.		
12.	OFFICERS AN		18.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	DP	L_] DELETE	1.1 111.	L₹	1			☐ Chan	ige 🔲 Addition
NAME	KERRY, JEAN M.		1.2 NAI	ME	1				
STREET ADDRESS	10030 NW 39TH CT		1.3 STF	REET A	ADDRESS				
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 017	Y-ST-	- ZIP				
TITLE		☐ DELETE	2 1 Till	LE				Chan	ge Addition
NAME			2.2 NAI	ME					
STREET ADDRESS			2.3 STF	REET AF	ADDRESS				
C(TY-ST-ZIP			2. # CI	1Y-51	1 - 71P				
TITLE		DELETE	3.1 7171	LE				Chan	ge 🔲 Addition
NAME			3.2 NAI	ΜL	-				
STREET ADDRESS			3 3 STF	HEET A	ADDRESS				
CITY-ST-ZIP			3.4. C(1	IY-ST	Γ- Ζ ΙΡ				
TITLE		☐ DELETE	4.1 TUN	LF				Chan	ge 🔲 Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STH	REETA	ADDRESS				
CITY-ST-ZIP			4.4 CII	Y-S1-	- 7 1P				
TITLE		DELETE	5.1 TH	l F				Chan	ge Addition
NAME			5.2 NAI	ME					
STREET ADDRESS		:	5 3 ST#	KEFF A'	ADDRESS				
CITY-ST-ZIP			5.4 CIT						
TITLE		DELETE	6 1 1111					Chan	ge Addition
NAME			6.2 NA	ME					- -
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			64 CH						
AA Lak basab				. 31-		0 11 110 07 07 17			

14. Lao nereby ceruly 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.

X-m Hen

4/23/1

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