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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L90471 1. Corporation Name

IOSE I. MARQUEZ, M.D., P.A.

Feb 18, 1999 8:00 am Secretary of State

02-18-1999 90013 010 ***150.00



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Principal Plac	e of Business	Mailing A	Address			i ibbiilali ara (arii desit dribt labdat (las alest analt esat) arati esati casi.	
155 W 49 ST		155 W 49	9 ST				
HIALEAH FL 33012 HIALEAH FL 33012					DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualifed	٦
						08/02/1990	
2 Principal P	Mace of Business	2a Mailir	ng Address			4. FEI Number Applied For	┪.
21	labe of Education	26				65-0207173 Not Applicable	1 3
Suite, Apt.	# etc.		, Apt. #, etc.			\$8.75 Additional	† ;
22	,	27	•			5. Certificate of Status Desired Fee Required	
City & Stat	te		& State	-		6. Election Campaign Financing \$5.00 May Be	7
23		28	-			Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Count	ry	8. This corporation owes the current year Intangible	
24	25	29	[30		Personal Property Tax. Yes No	╛
	9. Name and Address of Curre	nt Registered	Agent			10. Name and Address of New Registered Agent	4
		•		8	1 Name		
	CE, IRA B.			8	2 Street	Address (P.O. Box Number is Not Acceptable)	1
9130'S DADELAND BLVD			L		and the state of t	1	
#17				8	3		
MIAI	MI FL 33156			- E	4 City	85 Zin Code	1
ريخ جي په ستو					1 - 3		╛
11. Pursuant office or r agent. La	to the provisions of Sections 607.05 egistered agent, or both, in the State on familiar with, and accept the oblig	02 and 607.150 of Florida. Su ations of, Section	08, Florida Statute ch change was au on 607.0505, Flor	es, the about thorized to ida Statut	ve-named by the corposes.	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE			, augre	O		required when reinstating) DATE	1.
12.	Signature, typed or printed name of registered ag	ent and title if applica	•	13.	ent signature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	- 1
TITLE	D	ND DIRECTOR	10	10.		ABBITIONO OF THE PROPERTY OF T	
			☐ DELETE	1.1 TITL		☐ Change ☐ Addition	7
NAME			☐ DELETE			☐ Change ☐ Addition	
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14. 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 employered 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 attainment with an address, with all other like empowered.