FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L92421

(1)

WEISSMAN & BEEK, D.P.M., P.A.

Delinated Disco of Business

Mailing Address

FILED Jun 18 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address						
2441 BW 22 ST MIAMI FL 3314		2441 SW 22 ST MIAMI FL 33145-3409						
					3. Date incorporated or Qualified 08/10/1990	3a. Date of Last f 05/14/1996	a. Date of Last Report 05/14/1996	
	lace of Business	2a. Mailing Address	. Mailing Address		4. FEI Number		opplied For	
21 26					65-0218389	Not Applicable		
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be			
3		28			Trust Fund Contribution		to Fees	
Zip	Country	Zip	Countr	У	This corporation has liability for it Florida Statutes	tangible tax under s	s. 199.032,	
4	25 9 Name and Address of	29 Current Registered Agent	30		Florida Statutes 10. Name and Address of New Reg			
KRA	MER, ROBERT M.		81	Name 🕢		^ ^		
	HOLLYWOOD BLVD		-		ichard Weissma			
SUITE 485 SO			62	Street Addre	ess (P.O. Box Number is Not Acceptable			
	LYWOOD FL 33021		83		111 300 00 00			
			84				0-1	
	, 1	telaine Weissman	84	City Mi	ami	FL 85 2 2	Code	
11. Pursuant t			es, the above	re-named corp	oration submits this statement for the prion's board of directors. I hereby accep	urpose of changing	its registered	
office or re agent. I a	egistered agent, or bothuin th m familiar with, and accurt th	e State of Florida. Such change was a e tibligations of, Section 607.0505, Flo	iuthorized b rida Statute	y the corporati is:	ion's board of directors. I hereby accep	the appointment as	s registered	
SIGNATURE	Helseine V				am, F1 33176 S	15197		
	Signature, typed or printed name of regis	stered agent and title if applicable (NOTE	: Registered Ag	ont signature require	ed when reinstaling)	DATE		
12.	OFFICE D	RS AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	WEISSMAN, RICHARD D		1.1 10TLE	\		Change	Addition	
NAME	2441 SW 22 ST	er m	1.2 NAME					
STREET ADDRESS	MIAMI FL			1 AUDRESS				
CITY-ST-ZIP TITLE	D DELETE		1.4 City-St-zip 2.1 Title			Change	Addition	
NAME	BEEK, DOUGLAS DPM		2.2 NAME					
STREET ADDRESS	2441 SW 22 ST			T ADDRESS		•		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-					
TITLE		☐ DELETE	3.1 TITLE			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			34.007	ST-71P				
TITLE		DELETE	4 1 TITLE	İ		☐ Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS				I ADDRESS				
CITY-ST-ZIP		DILETE	4.4 CITY	\$1 - ZIP		Change	Addition	
TITLE		F) breeze	5.1 TillE			<u> — опапде</u>	LT ADDITION	
NAME CTREET ADDRESS			5.2 NAME	ADDDEED				
STREET ADDRESS CITY-ST-ZIP			5.3 STREE 5.4 CHY-	T ADDRESS				
TITLE		DELETE	61 INLE	01-515		Change	Addition	
NAME		band - Committee	6.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			6.4 CITY-					
14. I do hereb	by certify that the information s	supplied with this filing does not qualify	y for the exi	emption stated	in Section 119.07(3)(i), Florida Statutes	I further certify tha	t the	
l am an of	fficer or director of the corpora	ation or the receiver or trustee empowe	ered to exe	urate and that cute this report	my signature shall have the same legal Las required by Chapter 607, Florida St	effect as if made ur atutes; and that my	nder eath; tha name	
appears i	n Block 12 or Block 13 ,#9har	anon of the receiver of this tee emboweringed, or on an attachment with an add	irejas. ja		t as required by chapter our, Florida Si	accico, and macmy	Harris	