## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996
DOCUMENT # Mo

SIGNATURE

M41267

(9)

KENDALL	OAKS	<b>PROFESSIONAL</b>	CENTER.	INC.

Puncipal Page of Business Mailing Address  11010 N KENDALL DR STE 200 6401 SW 87 AVE MIAMI FL 33176 SUITE 210 MIAMI FL 33173								
		US			<ol> <li>Date Incorporated or Qualifie</li> <li>11/06/1986</li> </ol>	d <b>3a.</b> (	Date of Last Report 01/20/1995	
2. Principal Plac	ce of Business  See 87 Ave	2a. Mailing Address			4. FEI Number		Applied For	
21] <b>(24-0)</b>	an of the	26			59-2745328	··	Not Applicable	
22 Svik	2/0	Suite. Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23 / State	mi H.	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
24 33/7	73   Country   125   125	74) 29	Country 30	,	8. This corporation has liability Florida Statutes	or intangit⊭i ∕es ⊟ No	e tax under s 199.032,	
, 00,	9. Name and Address of Curi				10. Name and Address of Nev			
			81	Name				
	LAWRENCE T		82	Street Add	ress (P.O. Box Number is Not Accep	tahla)		
11010 N STE 200	KENDALL DR		83		ess ( .o. box Hallbor is Not Accept			
MIAMI FL								
IN STATE OF	2 00 170		84	City		F	85 Zip Code	
familiar with	ed agent, or both, in the State of Fi a, and accept the obligations of, Se Section, type opened home discussed a	onda. Such change was authorized ection 607.0505, Florida Statutes.	Dy the corp	oration's boa	ration submits this statement for the rd of directors. I hereby accept the a	ppointment pair	t as registered agent. I am	
TIME	PD	ANO DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO C	FHCERS A		
N/M	DEDDY, LAWRENCE T.	Dotter	12 NAME				Change Addition	
STREET ADDRESS	11010 N KENDALL DR #26	00		ADDRESS 7	775 SW 87 A	_		
C-14 - \$1-7aP	MIAMI FL		1.4 CITY - :		11AMI 71 33171	2		
FIEE	DST	☐ DELETE	2 1 TITLE		11-11 70 0011	·	Change Addition	
NAME	MCKEAN, RANDOLPH A		2 2 NAME					
STREET ADDRESS	6401 SW 87TH AVE 210		2 3 S1HFf	ADDRESS	_			
CH \$1 Zer	MIAMI FL		2 4 CITY - :	ST-7IP 64	UANI. 71. 330	13		
1.11.1		[] DELETE	3 1 TITLE	}	•		Change Addition	
AAM:			3 2 NAME					
S RELEASEDERS				I ADDRESS				
CODY ST ZIE		☐ DELETE	3.4 C-TY - 5 4. 1 T-TLE	5T - 7IP		<del></del>	Change C Addition	
N.W.			4.1 MLE				Change Addition	
STREET ADDIESS			4.3 STREE	ADDRESS.				
Oh SLZIP			4.4 City - 5					
Title		□ DELETE.	5 1 TiTLE				Change Addition	
137:			5 2 NAME				_ , <b>_</b>	
STREET ACTIONS SO			5 3 STREE	ADDRESS				
CHY-\$1-7H			5 4 CHY-	St - ZIP				
int-		DELETE	6 1 TITLE				☐ Change ☐ Addition	
1,557			6.2 NAME					
STREET ADDRESS			63 STREE	ADDRESS				
City Stizin	Countie Harris Commission	of North Complete of the Compl	6 4 CITY - 1					
certify that t	certify that me information supplice the information indicated on this ar	nough report or supplemental annua	neo and do∈ al report is tri	e not quality f	or the exemption stated in Section 1 are and that my signature shall have t	re.u7(3)(k), he same le	≠lorida Statutes. I further gal effect as if made under	

A MYCH OF DIRECTOR

1/16/96 34-236.0880