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

PROFIT CORPORATION 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90008 007 ***150.00

ANNUAL REPORT

DOCUMENT # M S4 350 1. Corporation Name IVAN A MONTOYA	9 P. A.			مسمد		
Principal Place of Business	Mailing Address				-	
ISI CAPE FLORIDA DA	!,					•
			•		DO NOT WRITE IN THIS	SPACE
KEY BISCAYNE, F. 33149					3. Date Incorporated or Qualifed の6/ショルカー	
2. Principal Place of Business	2a. Mailing Address				4. FEI Number	Applied For
1	26				19-18/2/96	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.					\$8.75 Additional
,2	27				5. Certifcate of Status Desired	Fee Required
City & State	City & State		~		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Count	ý,	-	8. This corporation owes the current year Int	angible
4 25	29	30			Personal Property Tax.	☐ Yes ☐ No
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
BECKER, THRODORE 177 OCEAN LAWE DR #514 KEY BISCAGNE FO. 33149			1 Na	me		
			82 Street Address (P.O. Box Number is Not Acceptable)			
			4 Cit	у	FL	85 Zip Code
			 Pursuant to the provisions of Sections 607.050; office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligate 	of Florida. Such change was	authorized b	y the c

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstatung) DATE									
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE		1.1 TITLE	☐ Change ☐ Addition						
VAME	PRRIDENT DELETE IV AN MONTOYA IT CAPE FLORISA DA. 37149 KEY BISCAYNE FL DELETE	1.2 NAME							
STREET ADDRESS	ITI CAPE FLORIBA DR.	1.3 STREET ADDRESS							
CITY-ST-ZIP	KEY BISCAMAS FL 37149	1.4 CITY-ST-ZIP							
TITLE	DELETE	2.1 TITLE	☐ Change ☐ Addition						
VAME		2.2 NAME							
STREET ADDRESS		2.3 STREET ADDRESS							
CITY-ST-ZIP		2. 4 CITY-ST-ZIP							
ITTLE	☐ DELETE	31 TITLE	☐ Change ☐ Addition						
VAME	<u> </u>	3.2 NAME							
STREET ADORESS	· · · · · ·	3.3 STREET ADDRESS							
CITY-ST-ZIP		3.4. CITY-ST-ZIP							
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition						
VAME	•	4. 2 NAME							
STREET ADDRESS		4.3 STREET ADDRESS							
CITY-ST-ZIP		4.4 CITY-ST-ZIP							
TITLE	☐ DELETE	5.1 TITLE	Change Addition						
NAME		5.2 NAME							
STREET ADDRESS		5.3 STREET ADDRESS							
CITY-ST-ZIP		5,4 CITY-ST-ZIP							
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition						
NAME		6.2 NAME							
STREET ADDRESS		6.3 STREET ADDRESS							
CITY-ST-ZIP	N. F. H.	6.4 CITY-ST-ZIP	Section 440 07(0)(i) Florido Statutas I further cortify that the information						

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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

M 54359 583021-90008-7

Becker & Becker

New York (516) 799-7186 Fax (516) 541-6009

Florida (305) 861-7565 Fax (305) 861-0578

June 1, 1999

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Ivan A. Montoya, M.D., P.A. P.O. Box 1168 Key Biscayne, FL 33149 F.E.I. 59-2812596 Document #M54359

I am the accountant for the above named corporation. The taxpayer never received the Profit Corporation Annual Report for 1999.

We respectfully request that you accept this \$150.00 check and as soon as we receive the form indicated, we will file.

Sincerely,

Theodore Becker 228 Riviera Drive West Massapequa, NY 11758

800 799-2325