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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # M88502

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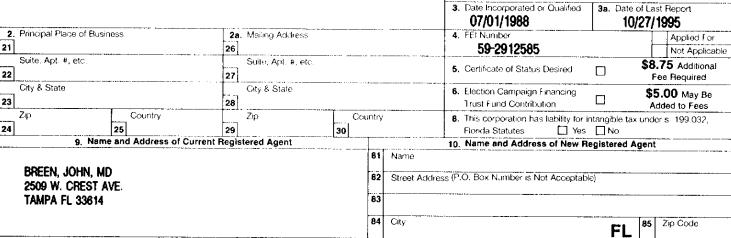
1. Corporation Name

JUHN	r.	DALEN,	M.U.,	P.A.

Principal Place of Business 2509 W. CREST AVE. TAMPA FL 33614

Mailing Address

2509 W. CREST AVE. TAMPA FL 33614



11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	harered
SIGNATURE	
Signalize threet or printed can be chargetered agent and the Lagrandaire. Other by potentially on agrature record when removing DATE.	

12.	OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	☐ DELETE	1. 1 THTLE	☐ Change ☐ Addition	
NAME	Breen, John F.		1.2 NAME		
STREET ADDRESS	2509 W. CREST AVE.		1.3 STREET ADDRESS		
CITY - ST - ZIF	TAMPA FL 33614		1.4 CHY-S1-ZIP		
TITLE	7.17	☐ DELETE	2 1 THUE	☐ Change ☐ Addition	
NAME			2.2 NAME	· · <b>_</b>	
STREET ADDRESS			2.3 STHEFT ADDRESS		
CITY - ST - ZIP			2 4 CITY - ST - ZIP		
TITLE		☐ DELFIE	3 1 TITLE	☐ Change ☐ Addition	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-7P			3.4 CHY-ST-7IP		
TITLE		DELETE	4 1 T.TLE	Change Addition	
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4.C(TY - \$1 - Z(P)		
TITLE		DELETE	5 1 TOTLE	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 ☐ Addit on	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STHEET ADDRESS		
CHY-ST-ZIP		•	64 CITY - S! - 7iP		

14. I do hereby certify that the information supplied with this hilling is voluntarily any ished and does not qualify for the exemption stated in Section 119.07(3)(6). Florida Statutes I further certify that the information indicated on this annual report of supplied and does not qualify that the information indicated on this annual report of supplied and call peor is true and accurate agri 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 eclevier by true endoughed to execute this prior as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, by on an approximent with respect to execute this prior to a required by Chapter 607.

SIGNATURE: 6

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813-877-1688

Daytime Phone I