

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M92924** (3)

1. Corporation Name

TREASURE COAST COSMETIC SURGERY CENTER, INC.

Principal Place of Business

**C/O JOYCE MCCLINTOCK VIGGIANO
1901 PORT ST. LUCE BLVD
PORT ST. LUCIE FL 34952**

Managing Office

**C/O JOYCE MCCLINTOCK VIGGIANO
1901 PORT ST. LUCE BLVD
PORT ST. LUCIE FL 34952**



2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

County

24

25

2a. Managing Office

26

State, Apt. #, etc.

27

City & State

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Zip

County

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9. Name and Address of Current Registered Agent

**VIGGIANO, JOYCE MCCLINTOCK
1901 PORT ST. LUCIE BLVD.
PORT ST. LUCIE FL 34952**

3. Date of Incorporation or Qualification

08/04/1988

3a. Date of Last Report

03/07/1995

4. FID Number

65-0061001

Applied For

Not Applicable

5. Contribution of State (Domestic)

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for interstate tax under s. 199.032
Foreign Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Section 606.01, Florida Statutes, the above named corporation, when the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, was authorized by the corporate officers and directors, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sections 606.01-606.05, Florida Statutes.

SIGNATURE

Signature of the person who is the registered agent

Signature of the person who is the registered agent

Date

12. OFFICERS AND DIRECTORS

TITLE

**DP
VIGGIANO, DONATO A.
1901 PT. ST. LUCIE BLVD.
PT. ST. LUCIE FL**

☐ DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

**DST
VIGGIANO, JOYCE M.
1901 PT. ST. LUCIE BLVD.
PT. ST. LUCIE FL**

☐ DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

**D
ATKISSON, EUGENIE
1901 PT ST LUCIE BLVD
PT ST LUCIE FL**

☐ DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

**D
ATKISSON, EUGENIE
1901 PT ST LUCIE BLVD
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NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

13.

ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN

1. NAME

2. NAME

3. NAME

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SIGNATURE:

Joyce M. Viggiano Sec-Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 402/335-7776

CR2E034 (12/95)