

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P93000025747 (5)**
1. Corporation Name
CARDIOVASCULAR CENTERS OF PORT ST. LUCIE, INC.

Principal Place of Business
**1700 S.E. HILLMOOR DRIVE
SUITE 202
PORT ST. LUCIE FL 34952**

Mailing Address
~~**336 CAMP STREET
SUITE 250
NEW ORLEANS LA 70130
US**~~

98 AUG -4 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 **2755 Campus Drive**

27 Suite, Apt. #, etc.

28 City & State
San Mateo, CA

29 Zip Country
94403 USA

3. Date Incorporated or Qualified

04/07/1993

4. FEI Number

72-1235790

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~**WERTHEIMER, DAVID
1700 SE HILLMOOR DR
SUITE 202
PORT ST. LUCIE FL 34952**~~

10. Name and Address of New Registered Agent

81 Name
Ct Corporation System
82 Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Road
83
900002608409--E
84 City
Plantation

**08/05/98 0102-015
****550.FL ****332400**

11. Pursuant to the provisions of sections 607.050 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. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, section 607.050, Florida Statutes.

**NASEEM A. CONDE
SPECIAL ASST. SECRETARY**

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
	WATTS, RALPH J	336 CAMP STREET STE 250	NEW ORLEANS LA	<input checked="" type="checkbox"/>
	THOMPSON, JACK	336 CAMP ST STE 250	NEW ORLEANS LA	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	Change	Addition
Chairman & Director	David E. Wertheimer	1700 SE Hillmore Drive #202	Port St. Lucie, FL 34952	<input type="checkbox"/>	<input checked="" type="checkbox"/>
President & Director	Swapan Sen	7 Waterside Crossing	Windsor, CT 06095	<input type="checkbox"/>	<input checked="" type="checkbox"/>
CFO & Director	E. Payson Smith, Jr.	2755 Campus Drive, Suite 200	San Mateo, CA 94403	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Secretary	Michael O. Kokesh	2755 Campus Drive, Suite 200	San Mateo, CA 94403	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 in an attachment with an address.

SIGNATURE:

Michael O. Kokesh

7/30/98

650-349-0800

011545

CR2E034 (5/98)