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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Jul 21 1997 8:00am

Secretary of State

DOCUMENT # P93000031184 (3)

JEFFREY H. KOTZEN, M.D., P.A.

14. I do hereby certly that the information supinformation indicated on this annual report I am an officer for director of the corporation appears in Block 12 or Block 13 if change

Principal Plac	e of Business	Mailing	Mailing Address					i soonikan iku konda kukik daini		II KEEL HOOF IO	III Bibl (B b f
1411 NORTH I	FLAGLER DRIVE	1411 N	1411 NORTH FLAGLER DRIVE STE. 7800								
STE. 7800	P4441 F1 44464										
WEST PALM E	BEACH FL 33401	WEST	WEST PALM BEACH FL 33401-3412								
								3. Date Incorporated or Qu 04/28/1993		ate of Last F /03/1996	Report
	Place of Business	2a. Ma	iling Address					4. FEI Number		Α	pplied For
21		26						65-0405057		N	lot Applicable
Suite, Apt.	#, OIC.		Suite, Apt. #, etc.					5. Certificate of Status Des	ired 🔲		Additional
22 City & Stat		27	City & State								Required
23	C	<u></u> ⊢ ′	<u>├</u>					6. Election Campaign Finar			May Be
Zip	Country	28 Zin	Zip Country				Trust Fund Contribution	Ц		to Fees	
24	25	29	30					This corporation has liab Stotutes	oility for intangible Yes		s. 199.032,
	9. Name and Address of Curr		d Agent	<u> </u>	Т			Florida Statutes 10. Name and Address of I		_	
COL	OKE, BRIAN J				81	Name		101 Marie Mila Madi Dob Di	Total Hogistolou	- Agoin	
	LAKEVIEW AVENUE, SUITE 26	30			82						
	ST PALM BEACH FL 33401	~				Street	Addres	ss (P.O. Box Number is Not A	cceptable)		
					83						
								· · · · · · · · · · · · · · · · · · ·			
					84	City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.09	502 and 607.15	508, Florida Statu	iles, the a	1bove	e-named	corpor	ration submits this statement	or the purpose of	f chancing i	its registered
office or r	to the provisions of Sections 607.0: egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. S idations of Sec	uch change was	authorize	ed by	the cor	poration	n's board of directors. I hereb	y accept the app	ointment as	registered
SIGNATURE		g		ionida bit							
SIGNATORE	Signature, typod or printed name of registered a	igent and title if appl	cable (NO	TE: Register	ed Ago	ot signature	beriuper e	when reinstating)	DATE		
12.	OFFICERS A	NO DIRECTOR		13.				ADDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR	RS IN 12
TITLE	P		DELETE	1.1 1	nte		1			Change	☐ Addition
NAME	KOTZEN, JEFFREY H			1.2 h	AME	د	ļ				
STREET ADDRESS	250 PENDLETON AVE			1.3 5	TREET	address					
CITY-ST-ZIP	PALM BEACH FL 33480				ATY-S	T-71P	ļ				
TITLE			☐ DELETE	2.1 1	ITLE					Change	Addition
NAME				2.2 N	AME						
STREET ADDRESS				2.3 S	TREET	ADDRESS	1				1
CITY-ST-ZIP			Driete		CITY - S	1-ZIP	ļ				
TITLE			DELETE	3.1 T						☐ Change	Addition
NAME DADGET ADDRESS				3.2 N			ì				
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP TITLE			DELETE	3.4. (4.1.1	CITY - S	T - ZIF		·		1166	4 2200
NAME			- precent	4.2						☐ Change	☐ Addition
STREET ADDRESS						4D0D000					ŀ
CITY-ST-ZIP						ADDRESS					
TITLE			DELETE	5.1 T	ITY-SI	- ZIP	-			Change	Addition
NAME				5.2 N					4	☐ Cuange	nouliall
STREET ADDRESS						ADDRESS :					
CITY-ST-ZIP					174-ST						
TITLE			DELETE	61 T		T.II	 			Change	Addition
NAME				62 N							
STREET ADDRESS				1		address					
				100		_,	I				

upplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the control of the same legal effect as if made under each; that the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name