

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000048891

1. Entity Name

FREDERICK J. SCAVONE, D.P.M., P.A.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90064 019 ***158.75

Principal Place of Business

Mailing Address

PALMED MEDICAL PLAZA - SUITE 114
7150 WEST 20TH AVE.
HIALEAH FL 33016

PALMED MEDICAL PLAZA - SUITE 114
7150 WEST 20TH AVE.
HIALEAH FL 33016-5529

6338



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0423467

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

[SCAVONE, FREDERICK J]
7150 W 20 AVE
SUITE 114
HIALEAH FL 33016

This Name has been changed to
Palmetto Podiatry Institute
See attached document

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS SCAVONE, FREDERICK J
CITY-ST-ZIP 1685 SEAGRAPE WAY
HOLLYWOOD FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 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 #

CR2E034 (9/99)



#P93000048891
6338

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

March 20, 2000

**FREDERICK SCAVONE
7150 W. 20TH AVENUE, SUITE 114
HIALEAH, FL 33016**

Re: Document Number P93000048891

The Articles of Amendment to the Articles of Incorporation of FREDERICK J. SCAVONE, D.P.M., P.A. which changed its name to PALMETTO PODIATRY INSTITUTE, P.A., a Florida corporation, were filed on March 20, 2000.

Should you have any questions regarding this matter, please telephone (850) 487-6050, the Amendment Filing Section.

**Carol Mustain
Corporate Specialist
Division of Corporations**

Letter Number: 100A00015309