

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
CORPORATE DIVISION
3000 BANKERS BUILDING
TALLAHASSEE, FLORIDA 32399-0001

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 10: 04

DOCUMENT # P93000062520 (0)

AMERICAN PEDIATRIC SYSTEMS, INC.

**2650 DOUGLAS ROAD
CORAL GABLES FL 33134**

**2650 DOUGLAS ROAD
CORAL GABLES FL 33134**

3. Date of Appointment: 09/02/1993		3b. Date of Appointment: 07/20/1994	
4. Filing Number: 65-0504562		Appoint For: ☐ Not Applicable	
5. Certificate of Status: ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing: ☐		\$5.00 May Be Added to Fees	
8. This corporation has, directly or indirectly, done business with:		☒ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent											
HARRIS, CHRISTINA D ESQ. C/O THE VINCAM GROUP, INC. 2650 DOUGLAS ROAD CORAL GABLES FL 33134		<table border="1"> <tr> <td>81. Name</td> <td></td> </tr> <tr> <td>82. Street Address (if 2) Box Number - Not Applicable</td> <td></td> </tr> <tr> <td>83. City</td> <td></td> </tr> <tr> <td>84. State</td> <td>FL</td> </tr> <tr> <td>85. Zip Code</td> <td></td> </tr> </table>		81. Name		82. Street Address (if 2) Box Number - Not Applicable		83. City		84. State	FL	85. Zip Code	
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83. City													
84. State	FL												
85. Zip Code													

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct statement of the facts as the same appear from the records of the Department of State, and that the same are true and correct to the best of my knowledge and belief.

Signature: _____ Date: _____

12. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P SALADRIGAS, CARLOS A	NAME	
ADDRESS	2850 DOUGLAS RD.	ADDRESS	
CITY	CORAL GABLES FL	CITY	
NAME	T SANCHEZ, JOSE M	NAME	
ADDRESS	2850 DOUGLAS RD.	ADDRESS	
CITY	CORAL GABLES FL	CITY	
NAME	S HARRIS, CHRISTINA D	NAME	
ADDRESS	2850 DOUGLAS RD.	ADDRESS	
CITY	CORAL GABLES FL	CITY	

REMITTED BY MAY 1

SIGNATURE:

Carlos A Saladrigas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/4/95