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Apr 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000062520 (0)

1. Corporation Name

AMERICAN PEDIATRIC SYSTEMS, INC.

Principal Place of Business

2850 DOUGLAS ROAD
CORAL GABLES FL 33134

Mailing Address

2850 DOUGLAS ROAD
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1993

4. FEI Number

65-0504562

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KEELER, ELIZABETH J. (name change only)
2850 DOUGLAS RD.
CORAL GABLES FL 33134

81 Name

Elizabeth J. Marston

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME SALADRIGAS, CARLOS A
STREET ADDRESS 2850 DOUGLAS RD.
CITY-ST-ZIP CORAL GABLES FL

TITLE VP ☐ DELETE

NAME SANCHEZ, JOSE M
STREET ADDRESS 2850 DOUGLAS RD.
CITY-ST-ZIP CORAL GABLES FL

TITLE S ☐ DELETE

NAME KEELER, ELIZABETH J.
STREET ADDRESS 2850 DOUGLAS RD.
CITY-ST-ZIP CORAL GABLES FL

TITLE TS ☐ DELETE

NAME PEREZ, MARTIN J
STREET ADDRESS 2850 DOUGLAS ROAD
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE AS ☐ DELETE

NAME CUETO, WILLIAM F
STREET ADDRESS 2850 DOUGLAS ROAD
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE CFO ☐ DELETE

NAME WAECHTER, STEPHEN L.
STREET ADDRESS 2850 DOUGLAS ROAD
CITY-ST-ZIP CORAL GABLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CEO ☒ Change ☐ Addition

1.2 NAME Carlos A. Saladrigas
1.3 STREET ADDRESS 2850 Douglas Road
1.4 CITY-ST-ZIP Coral Gables, FL 33134

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Secretary ☒ Change ☐ Addition

3.2 NAME Elizabeth J. Marston
3.3 STREET ADDRESS 2850 Douglas Road
3.4 CITY-ST-ZIP Coral Gables FL 33134

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE President ☐ Change ☒ Addition

5.2 NAME John T. Carlen
5.3 STREET ADDRESS 2850 Douglas Road
5.4 CITY-ST-ZIP Coral Gables FL 33134

6.1 TITLE CFO ☒ Change ☐ Addition

6.2 NAME Carlos A. Rodriguez
6.3 STREET ADDRESS 2850 Douglas Road
6.4 CITY-ST-ZIP Coral Gables FL 33134

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 registered 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 on an attached exhibit with explanations.

SIGNATURE:

3/24/98 (305) 460-2350

CR2E034 (10/97)