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

PROFIT
CORPORATION
ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 13 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000088226 (4)

FRANK COLUNGA, M.D., P.A.

Mailing Address Preceptal Place of Business 2015 EL CERITO ST 2015 EL CERITO CT PUNTA GORDA FL 33950-6430 PUNTA GORDA FL 33950 US 3a. Date of Last Report 3. Date Incorporated or Qualified 12/28/1993 05/01/1996 2. Principal Paix of Business 2a. Mailing Address 4. FEI Number Applied For 59-3220284 Not Applicable 21 Sabi Apt # leti Suite Apt #. ata \$8,75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П **Trust Fund Contribution** Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name WEINSTEIN, SCOTT WM. 1625 HENDRY STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 103 83 FORT MYERS FL 33901 84 Zip Code 85 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 off according to holly, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. From with, and accept the oc. gations of, Section 607.0505, Florida Statutes. SIGNATURE Consists of the Company of the constitution of ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OF LICERS AND DIRECTORS 13. **PSTD** DELETE 1.1 THLE Change Addition 1000 COLUNGA, FRANK 1.2 NAME R2E034 NAM 724 VIA TUNIS 1.3 STREET ADDRESS SIEE ALDRESS PUNTA GORDA FL 1.4 CiTY-ST-7/P Llr-S DELETE Change Addition Till f 2.1 TITLE NAMS 2.2 NAME 2.3 STREET ADDRESS STREET MESS. UB 51 70 2 4 CITY - ST - ZIP DELETE Addition 3.1 TITLE Change 10.5 NAME 3.2 NAME SHELL ODE: 5 3.3 STREET ADDRESS CHY of Zer 34 CHTY-ST-ZIP DELETE Change Addition 4 1 TITLE 111,8 4. 2 NAME 1,353 43 STREET ADDRESS \$18EE1.7, (091.5) 44 CITY-ST-ZIP CIY SL 2 DETETE Change Addition SETITUE 1111 5.2 NAME Mold! 53 STREET ADDRESS Strait Abords 5.4 City-ST-ZIP DELFTE Add tion ☐ Change THE 61 TITLE 6.2 NAME 5,565 6.3 STREET ADDRESS 经担任制金融经

64 CITY - ST - ZIP

information and cated on this around report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that that is considered to cated on this around report or the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if Chapter 607 or an attachment with an address

14. The fereing costly 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