

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000005774 (2)**

1. Corporation Name

MEDICAL SCIENCE CONSULTANTS, INC.



Principal Place of Business

**3400 PARK CENTRAL BLVD N
SUITE 3450
POMPANO BEACH FL 33064
US**

Mailing Address

**3400 PARK CENTRAL BLVD N
SUITE 3450
POMPANO BEACH FL 33064
US**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**GETSON, NORMAN B
2450 HOLLYWOOD BLVD.
SUITE 501
HOLLYWOOD FL 33020**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 of person performing this act on behalf of the corporation)

(Signature of Registered Agent)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D

LENZI, KAYE

2557 SW CRANBROOK DR

BOYNTON BEACH FL 33436

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

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TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

SIGNATURE: *Kaye Lenzi*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KAYE LENZI/DIR.

Date

Signature of Registered Agent

3. Date Incorporated or Qualified

01/25/1994

3a. Date of Last Report

04/26/1995

4. FEI Number

65-0462361

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 has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

CR2E034 (12/95)