## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORINA DEPARTMENT OF STATE

Secretary of State

**DIVISION OF CORPORATIONS** 

P94000022210 (6)

APPROVED AND FILED

1797 JUL 23 FH 1: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

HERBE	RT J. GERBER, M.D., P.A.						
						: ( <b>50</b> )   <b>(61)</b>   <b></b>	iii Bana iibir iibir nibir nibir iibii ban ban
<u> </u>							
Principal Plac	·	Mailing Address					114 00440 10800 11310 11044 HEIL 4014 1841
MEMORIAL H   3501 JOHNSO	OSPITAL, DEPT. OF PATHOLOGY		MEMORIAL HOSPITAL DEPT. OF PATHOLOGY				
HOLLYWOOD		3501 JOHNSON STREET HOLLYWOOD FL 33021				DO NOT WRITE	IN THIS SPACE
		***************************************				3. Date Incorporated or Qualified	3a. Date of Last Report
						03/22/1994	02/07/1996
	lace of Business	2a. Mailing Address				4, FEI Number	Applied For
21		26		65-0482853	Not Applicable		
Sulte, Apt. #, etc.						5. Certificate of Status Desired	\$8.75 Additional
22 27						o, obtained of blates besired	Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 Мау Ве		
23		28	1 0			Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	h	untry		8. This corporation owes or has pa	· ·
24]	25] g. Name and Address of Currer	29 Agent	30			Personal Property Tax due June  10. Name and Address of New Re	
GERBER, HERBERT J					Name	10. Name and Address of New Ne	gratered Agent
MEMORIAL HOSPITAL, DEPT. OF PATHOLOGY							
3501 JOHNSON STREET				82	Street A	ddress (P.O. Box Number is Not Acceptab	le)
	LLYWOOD FL 33021			83			
•	22111000120021						
				84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida State	ites, the a	bove	named o	corporation submits this statement for the p	urpose of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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.							
_	in laninal with, and accept the colly	alions of, Section 907.0505, F	ionua sia	llules	).		,
SIGNATURE	Signature, typed or printed name of registered age	nt and little if applicable. (NC	TE: Registere	ed Age	nt signature r	equired when reinstating)	DATE
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 T	ITLE			Change Addition
NAME	GERBER, HERBERT J.		1.2 N	iame		6000022	506665
STREET ADDRESS	3501 JOHNSON STREET		1.3 \$	TREET	address		9701067006
CITY-ST-ZIP	HOLLYWOOD FL 3302	1	1.4 0	HTY-S	T-ZIP	****165	
TITLE	DELETE		2.1 T	2.1 TITLE			Change Addition
NAME			2.2 NAME				
STREET ADDRESS		2.3 STREET		TREET	ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	2.40	2. 4 CITY - ST - ZIP			
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NAME			3.2 N.	IAME			
STREET ADDRESS			3.3 S	TREET	ADDRESS		
CITY-ST-ZIP				CITY-S	T-ZIP		
TITLE		☐ DELETE	4.1 TI		f		Change Addition
NAME			4. 2 N	AME			
STREET ADDRESS			4.3 \$	TREET	ADDRESS		
CITY-ST-ZIP				ITY-SI	- <b>2</b> 1P		
TITLE		☐ DELETE	5.1 TI				☐ Change ☐ Addition
NAME *			5.2 N				
STREET ADORESS					ADDRESS		
CITY-ST-ZIP		DELETE		ITY-SI	- ZIP		
TITLE		L. VELETE	6.1 TI				Change Addition
NAME CTDEET APPRICES			6.2 N/				17534 ·
STREET ADDRESS					ADDRESS		41, 10,
CITY-ST-ZIP			€ 6.4 CI	ITY-S1	- ZiP		

14. I do 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 ecceptar pytrusteer 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 or arrantagment with an address.

16 July 1997

John - July 16 - our accountant Jeri Salwasser. spake to a representative at the servision of Confortions about this filing-

Server did not pecure the initial return of this filing-gun representative paid that several after people had that received this gachet; it would only be recessary to pay the ariginal fee as \$16500 - and include this letter of luplaration.

Thank eyne.

Driveant Gerber for

Sterney g Gerber 4. D. Pt.