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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 PM 1:31

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000026175 (7)

1. Corporation Name

GARY L. STEUBER, DC, P A

Principal Place of Business

12850 STATE ROAD 84, BOX 18-28
DAVE FL 33325

Mailing Address

12850 STATE ROAD 84, BOX 18-28
DAVE FL 33325

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/06/1994

3a. Date of Last Report

2. Principal Place of Business

21 6950 Cypress Rd.

2a. Mailing Address

26 6950 Cypress Rd.

4. FEI Number

65-0487945

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Ste 105

Suite, Apt. #, etc.

27 Ste 105

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 Plantation, FL

City & State

28 Plantation, FL

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24 33317 25 Broward

29 33317

30 Broward

7. This corporation fees liability for litigation law under S. 118.01(2),
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

STEUBER, GARY L
12850 STATE ROAD 84, BOX 18-28
DAVE FL 33325

10. Name and Address of New Registered Agent

81 Name Gary L. Steuber DC. PA.
82 Street Address (Box Number, Not Applicable)
6950 Cypress Rd. Ste 105
83
84 City Plantation FL 85 Zip Code 33317

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 607.0503, Florida Statutes.

SIGNATURE

Gary L. Steuber DC

4/29/95

By signing this report, the officer or director of the corporation certifies that the information furnished is true and accurate.

(Signature of Registered Agent required when submitting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President
NAME Gary L. Steuber
STREET ADDRESS 6950 Cypress Rd. Suite 105
CITY ST ZIP Plantation, FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(A), 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 receiver or 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 sheet with an address.

SIGNATURE:

Gary L. Steuber DC

4/29/95

(Signature of Registered Agent required when submitting)

DATE