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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000029781 (9)

| PETER S. WARHEIT, M.D., P.A. Principal Place of Business 3296 N.W. 60TH ST. BOCA RATON FL 33496 Mailing Address 3296 N.W. 60TH ST. BOCA RATON FL 33496 | | | | | | | | | | | |
|--|-----------------------------------|---------------------------|---------------------------|---------------------------|-------------------------|--------------|--|---|---------------------------|---------------------------|--|
| | | | | | | | 3. Date Incorporated or Qualified 04/19/1994 | | ate of Last Re 01/1996 | eport | |
| 2. Principal F | Place of Busines | SS | 2a. M | 2a. Mailing Address 26 | | | 4. FEI Number 65-0488549 | | <u> </u> | plied For t Applicable | |
| Suite, Apt | #, etc. | | ├ ٦ | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 A | | |
| City & Sta | nte | | | City & State | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | | |
| Zip | } | | | Zip Co | | 7 | 8. This corporation has liability for intangible tax under s. 19 | | | | |
| 24 | 25 25 Name and Address of Current | | | 29 30 30 Registered Agent | | | Florida Statutes Yes No 10. Name and Address of New Registered Agent | | | | |
| WA | RHEIT, PETER | | | | 81 | Name | | • | | | |
| 329 | 96 N.W. 60TH CA RATON FL | ST. | | | | Street Ad | dress (P.O. Box Number is Not Accepta | ess (P.O. Box Number is Not Acceptable) | | | |
| | OA NATUN FL | . 33780 | | | 83 | | | | | | |
| | | | | | | 84 City FL | | | 85 Zip (| Code | |
| 11. Pursuani | t to the provision | ns of Sections 607 | .0502 and 607. | 1508, Florida Stat | utes, the abov | re-named co | rporation submits this statement for the | | | s registered | |
| SIGNATURE | | printed name of registers | ed agent and the frage by | oplicațile (N | OTE: Registered Ac | | rporation submits this statement for the ation's board of directors. I hereby accurred when reinstating) | DATE | | | |
| 12. Titlé | D | OFFICERS | S AND DIRECTO | DELETE | 13. | | ADDITIONS/CHANGES TO OFF | ICENS AN | Change | Addition | |
| NAME | WARHEIT, PETER S | | | 12 N | | | | | | | |
| STREET ADDRESS | | | | | | T ADDRESS | | | | ĺ | |
| CHY-ST ZIP | BOCA RAT | ON FL 33496 | | | | ST-ZIP | | ······································ | | () () () () () () | |
| TILE | | | | ☐ DELETE | 21 TITLE | į | | | Change | Addition | |
| NAME STREET ADDRESS | | | | | 2.2 NAME | T ADDRESS | | | | | |
| CITY-SI-ZP | ` | | | | 2. 4 CITY | | | | | ı | |
| TITLE | | | | DELETE | 3.1 T(FLE | | | | Change | Addition | |
| NAME | | | | | 3.2 NAME | Į. | | | | | |
| STREET ADDRESS | | | | | | T ADDRESS | | | | | |
| CITY - S.F - ZIP Till E | | | | DELETE | 3.4. CITY- 4.1 TITLE | ST-ZIP | | | Change | Addition | |
| NAME | | | | CJ Searce | 4. 2 NAME | | | | | VISOR 1 | |
| STREET ADDRESS | | | | | 1 | T ADDRESS | | | | | |
| CiTy - S1 - ZIP | | | | | 4.4 CITY- | ST-ZIP | | | | | |
| TITLE | | | | DELETE | 5.1 TITLE | | | | Change | Addition | |
| NAME | | | | | 5.2 NAME | | | | | 1 | |
| STREET ADDRESS | 1 | | | | | T ADDRESS | | | | | |
| CITY - ST - ZIP | 1 | , | | Drifte | 5.4 CITY - | ST-ZIP | | | 77 65 | Addition | |
| TITLE | | | | ☐ DELETE | 6.1 TITLE | | | | Change | Addition Addition | |
| NAME | | | | | 6.2 NAME | | | | | | |
| STREET ADDRESS | ' | | | | 63 STREE | T ADDRESS | | | | | |

64 CITY-ST-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 finual 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 attachment with an address.

SIGNATURE:

75-9) 361-777-Daytine Phone # 803 E

FILED

Apr 22 1997 8:00am

Secretary of State