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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000029781 1. Corporation Name

PETER S. WARHEIT, M.D., P.A.

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90097 017 ***150.00



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Principal Place of Business Mailing Address					,	4 ideiten isa igitt giftt anstrangur galts natur an	16 11418 (411) 1468	i ididi (iat iaat
3296 N.W. 60TH ST. 3296 N.W. 60TH ST.								
BOCA RATON FL 33496 BOCA RATON FL 33496						DO NOT WRITE IN TH	IC CDACE	
l						3. Date Incorporated or Qualifed	S SPACE	
						04/19/1994		
o Dissipal D	loss of Divolages	2a. Mailing Address				4, FEI Number		oplied For
——————————————————————————————————————						65-0488549		ot Applicable
								Additional
Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		27				5. Certificate of Status Desired		equired.
City & State		City & State				6. Election Campaign Financing	\$5,00	May Be
		28	i)			Trust Fund Contribution		to Fees
Zip Country		Zip	Zip Country			8. This corporation owes the current year	ntangible	
24			30			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registere	d Agent	
			- 1	81	Name			
WARHEIT, PETER S				82	Street Addr	Idress (P.O. Box Number is Not Acceptable)		
	S N.W. 60TH ST.		1					
BOC	A RATON FL 33496	•		83				
			}	84	City		. 85 Zip	Code
1			[Ų	•	<u></u>	┗▕▕▁	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida. Such change was a	authorized	by t	named corp he corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its ointment as re	registered egistered
SIGNATURE	•							
	Signature, typed or printed name of registered age			Agent	signature required	d when reinstating) DATE DATE	AID DIDECT	2DC (N) 42
12.		ND DIRECTORS DELETE	13.	-		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	D							
NAME	WARHEIT, PETER S		1.2 NA			•		
STREET ADDRESS	3296 N.W. 60TH ST.		- I		ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33496	☐ DELETE	1.4 CIT		ZIP		Change	☐ Addition
TITLE	·		2.1 til.		\	•		
NAME		•			ADODECO			
STREET ADDRESS				2.3 STREET ADDRESS 2.4 CITY-ST-ZIP				
CITY-ST-ZIP	<u> </u>	DELETE 3.1 TI			-219		Change	Addition
TITLE		_ 522215	3.2 NA					_
NAME expect appress					ADDRESS			
STREET ADDRESS	`		3.4. CF					ĺ
CITY-ST-ZIP		☐ DELETE	4.1 TIT	_	- 2.07	•	☐ Change	Addition
NAME			4. 2 NA				-	
STREET ADORESS					ADDRESS :			
f :			4.4 CIT					Ì
CITY-ST-ZIP	 	☐ DELETE	5.1 TIT				☐ Change	Addition
NAME -			5.2 NAME					
STREET ADDRESS	· · ·		5.3 ST	REET.	ADDRESS			
CITY-ST-ZIP			5.4 C/T	Y-ST	-ZIP			
TITLE		☐ DELETE	6.1 T(T	ı.E			☐ Change	☐ Addition
					I		- Originate	
NAME			6.2 NA				- Ontarigo	_
NAME STREET ADDRESS				ME	ADDRESS			

14. I 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 supplied ental 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 of 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 organ attachment with an address, with all other like empowered.

SIGNATURE: