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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000047531 (6)

URO SPECIALTY, INC.							
incipal Place	e of Business	Mailing Address			7 700 TI DU 110 70111 QEQUE QUILL DI	Anto Maist Adiol Andit 14	8801 BISBS 19801 1101 40
NORTHWOOD MEDICAL CENTER BLDG. G. STE. 5 NORTHWOOD MEDICAL CENTER B 3001 EASTLAND BLVD. CLEARWATER FL 34621 CLEARWATER FL 34621				DG. G. STE. 5			
<b>~~</b>	or the grown	ULLMINN, ETT 1 E E .	1021		<ol> <li>Date Incorporated or Qualified 06/24/1994</li> </ol>		Last Report 7/1995
Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
C. A		26			59-3252072		Not Applica
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		8.75 Additional Fee Required
ity & State	е	Crty & State		<del></del>	Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be
<u></u>	Country	Zip	Country	,	B. This corporation has liability to		Added to Fees
	[25]	29	30	'		es ∐No	nuers 199.032,
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New		ent
			81	Name			
ZACHARY, J. MARK S MD			82	Street Addre	ss (P.O. Box Number is Not Accept	able)	
	astland blvd.						
SUITE 5			83				
CLEAR	WATER FL 34616		84	City		FL <sup>8</sup>	5 Zip Code
Pursuant f	to the provisions of Sections 607,0502	2 and 607.1508. Florida Statu	utes, the above-r	L named corpora	ation submits this statement for the p	urnoco of chanci	no its registered of
	en egant e sont, il the etete et litera	aa, auch change was author	tized by the corp	oration's board	d of directors. I hereby accept the ap	ppointment as regi	isiereo agent. I an
tamiliar wi	th, and accept the obligations of, Section 1990	tion 607.0505, Florida Statute	rized by the corp es. NOTE: Registered Agen	oration's board	d of directors. I hereby accept the ap	_	istered agent. I am
tamiliar wi	th, and accept the obligations of, Section 1990	tion 607.0505, Florda Statute	es.	oration's board		DATE	
NATURE _	Signatur, Ignet of a grant anne of right feet agent  OFF JERS ANI	tion 607.0505, Florida Statute	8S. NOTE: Registered Agen	oration's board	when reinstating!	DATE FFICERS AND DIF	
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TAMILIAR WI	Signature, Injust of an automotive of agent OFF CERS AND ABREU, CESAR R MD 3001 EASTLAND BLVD., SUI	tion 607.0505, Florida Statute  La rich bitu (a) richatén (h  D DIRECTORS	NOTE: Rogistered Agen  13.  1.1 TITLE  1.2 NAME  1.3 STREET	nt signature required	when reinstating!	DATE FFICERS AND DIF	RECTORS IN 12
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SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

**SIGNATURE:**