
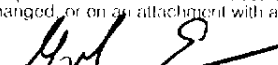


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name PEDIATRIC OPHTHALMOLOGY AND STRABISMUS CENTER, P.A. P94000052920			
Principal Place of Business 7800 West Oakland Park Blvd. Sunrise, Florida 33351 US		Mailing Address 1 Financial Plaza Ste 1900 Ft. Lauderdale, Florida 33304 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date incorporated or qualified 07/18/1994		4. FEI Number 65-0506771 Applied For Not Applicable	
5. Certificate of Status Desired \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No		9. Name and Address of Current Registered Agent SINAGRA, FRANK J HALEY, SINAGRA & PEREZ, P.A. 1 FINANCIAL PLAZA, STE 1900 FORT LAUDERDALE, FLORIDA 33394	
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL		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 607.0505, Florida Statutes.	
SIGNATURE Signature typed or printed name of registered agent and his or her appointer (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP P FELDMAN, MARK S M.D. 7800 W Oakland Park Blvd Sunrise, FL V BIZER, WAYNE D 8411 W Oakland Park Blvd. Sunrise, FL S EPSTEIN, GIL A M.D. 7800 W Oakland Park Blvd Sunrise, FL D GRODIN, RICHARD W M.D. 7800 W OAKLAND PARK BLVD SUNRISE, FL D ROUS, STANLEY M M.D. 7800 W OAKLAND PARK BLVD SUNRISE, FLORIDA		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	
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 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:  2/4/98 (754) 741-5555			

CR2E034 (10/97)