SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO RENSTATE: \$750.)

Jul 25 1997 8:00am **PROFIT** FLORIDA DEPARTMENT F STATE CORPORATION Sandra B. Morthim Secretary of State ANNUAL REPORT Secretary of Stat 1997 DIVISION OF CORPOR TIONS DOCUMENT # P9400054488 (9) THE SPINE CENTER OF BRADENTON, P.A. Principal Place of Business Mailing Address 2411 57TH AVE. WEST 2411 57TH AVE. WEST **BRADENTON FL 34207 BRADENTON FL 34207** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 07/21/1994 04/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0506306 21 26 Not Applicable Suite, Apt. #. etc. Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box 23 Trust Fund Contribution Added to Fees Zip Country Court This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. ☐ No 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FLAIM, CHRIS J **2411 57TH AVENUE, W** Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34207** City Zip Code 85 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 Stattes. SIGNATURE Signature, typed or printed name of registrated agent and title if applicable (NOTE: RegistererAgent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 TITLE DELETE 1111 Change Addition FLAIM, CHRIS J NAME 2411 57TH AVE. WEST STREET ADDRESS 1.3 STLET ADDRESS **BRADENTON FL 34207** CITY-ST-ZIP - ST-ZIP DELETE 21 ☐ Change ☐ Addition TITLE RANGEL, LEE NAME 2411 57TH AVE. WEST ET ADDRESS STREET ADDRESS **BRADENTON FL 34207** CRY-ST-ZIP - ST- ZIP DELETE Addition Change TITLE 3.1 NAME 32 ET ADDRESS STREET ADDRESS CITY-ST-ZIP ST-ZIP DELETE TITLE Change Addition NAME STREET ADDRESS E1 ADDRESS CITY-ST-ZIP 51 - 21P DELETE TITLE ☐ Change Addition NAME STREET ADDRESS 1 ADDRESS CITY-ST-ZIP ST-ZIP DELETE Change Addition TITLE NAME STREET ADDRESS ET ADDRESS -ST-ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with the filing information indicated on this annual report in supplier in the lam an officer or director of the corporation or the project of appears in Block 12 or Block 13 if the fig., gorn an attacking the supplier in Block 12 or Block 13 if the fig., gorn an attacking the supplier in Block 12 or Block 13 if the fig., gorn an attacking the supplier in th does not qualify for the kemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the updat report is true and acurate and that my signature shall have the same legal effect as if made under oath; that trustee empowered to epoute this report as required by Chapter 607, Florida Statutes; and that my name

nent with an address.

SIGNATURE:

FILED