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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

RWIN BERETSKY, M.D., P.A.  Percept Place of Business  284 N. 281H STREET FORT LAUDERDALE FL 33308  2. Procept Place of Business  2. Making Address  2. Making Address  2. Making Address  2. Making Address  3. Date incorporated or Quarked  3. Date incorporated or Qu	DOCUN 1. Corporation	MENT # <b>P9400</b>	0059053 (6	)						
Against a financial commons  Assale A 28th STREET FORT LAUDERDALE FL 33008  2. Principal Place of Business  2. A Mailing Address a  2. Experimental Place of Business  3. Data incorporated or Qualified  3. Data incorporation in Qualified  3. Data incorporated or	1. Coporator reme						I (ŽIMAČ) AIR (ZIN GIR) GIR) GANI	BBH GGIAL GI	118 12111 881 <b>1</b>	<b>.</b> 
293 N. 287H STREET   2030	6: : 16									
FORT LAUDERDALE FL 33008  FORT LAUDERDALE FL 33008  3. Data Incorporated or Quarked   3a. Data for Lauf Rejord   08/04/1994   03/05/1995   08/05/1995   08/04/1994   03/05/1995   08/05/199	Principal Place of Business Mailing Address									
Principal Place of Business   2a	- · · · · · · · · · · · · · · · · · · ·									
Supplementary   Supplementar							08/04/1994	1		
Country   Coun	2. Principal Place	ce of Business	<u></u> 1	, Mailing Address			**	FEI Number Applied For		
BERETSKY, IRWIN 2843 NE 28 STREET   BS   Zip Code   BS   Street Address of Current Registered Agent   BS   Street Address of Current Registered Agent   BS   Street Address of New Registered Agent   BS   Street Address   BS   Str	Suite, Apt. #	, etc.	<del>                                     </del>	<del></del>						
Country   Sp	City & State		<b>⊢</b>	<del></del>						
BERETSKY, (RWIN 2843 NE 28 STREET FT. LAUDERDALE FI 33306  80  64	— ,		Zıp	, · —			1			
BERETSKY, IRWIN 2843 NE 28 STREET FT. LAUDERDALE FL 33306  44 Only  FL	1			1001			_ <del></del>		Agent	
2843 NE 28 STREET FT. LAUDERDALE FL 33308  85  64  64  67  67  67  67  67  68  68  68  68  69  69  69  60  60  60  60  60  60  60					<b>B1</b>	Name				
## City ## Cit					B2	Street Addr	reet Address (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florids 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 Florids. Such change was suthorized 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. Floridal Statutes, Floridal Statutes, the above-named 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. Floridal Statutes, Floridal Statutes, the above-named 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. Floridal Statutes, the above-named 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. Floridal Statutes and Section 607.0505. Floridal Statutes are sufficiently accept the appointment as registered agent. I am familiar with an accept the appointment as registered office or sufficiently accept the appointment as registered agent. I am familiar with an accept the appointment as registered agent. I am familiar with a sufficient agent agent. I am familiar with a sufficient agent agent. I am familiar with a sufficient agent agent agent. I am familiar with a sufficient agent agent agent agent. I am familiar with a sufficient agent agent agent agent agent agent agent agent agent. I am familiar with a sufficient agent a			1	В3						
or registered agent, or both, in the State of Fordia. Such change was authorized by the corporation's bloard of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Specine 607,0565, Florida Statutus.  SIGNATURE  Signature, hyded or profided name of registerial agent and ties if agentative.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILLE  PD  BERETSKY, IRWIN  24 Addition  12 NAME  SIREET ADDRESS  CITY 51-2P  BOCA RATON FL 33496  14 CITY 51-2P  DELETE  13 SIREET ADDRESS  CITY 51-2P  TILLE  DELETE  3 TITLE  3 SIREET ADDRESS  CITY 51-2P  TILLE  DELETE  4 TITLE  Change  Addition  A				ļ	64	City	FL 85 Zip Code			o Code
Signature, pland or pertend raise of registration   NOTE   Registration   NOTE   Registration of registration   NOTE   Registration of registration   NOTE   Registration of registration   NOTE   Registration of registrat	or registere	d agent, or both, in the State of Florid	<ul> <li>a. Such change was authorize</li> </ul>	s, the aboved by the co	ve-n orpo	amed corpora oration's boar	ation submits this statement for the pur d of directors. I hereby accept the appo	pose of cha pintment as	nging its re registered	egistered office agent. I am
12.	SIGNATURE									
DELETE					ege:n	i signature required	· · · · · · · · · · · · · · · · · · ·		DIRECTO	)BS IN 12
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		certify that the information supplied w	vith this filing is voluntarily furni				or the exemption stated in Section 110	07/37N FIN	rida Statut	les I further

certify that the information indicated on this armual report or suppernental armual report is true and accurate and that my signature shall have the same legal effect as it 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 or Bl

SIGNATURE: X SIGNATURE AND