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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000064926 (6)

ROSEMARY DAVILA-MEDRANO DPM. P.A.

FILED Mar 24 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Ad	Mailing Address				1 1001201 110 12111 21217 30171 02111 02111 12114 91117 91919 19114 11218 4(11 1051			
7143 COLLIN			7143 COLLINS AVE							
MIAMI BEAC	H FL 33141	MIAMI BE	ACH FL 33141				DO NOT WRI	TE IN THIS	SPACE	
						:	3. Date Incorporated or Qualified		OI HOL	
							09/02/1994	-		
2. Principal F	Place of Business	2a, Mailing	Address				4. FEI Number			pplied For
21		26	,				65-0523054			ot Applicable
Suite, Apt.	#, etc.		Apt. #, etc.				1	k-2		Additional
22		27	,				5. Certificate of Status Desired	\boxtimes		equired
City & Stai	te	City &	State				6. Election Campaign Financing			May Be
23	•	28					Trust Fund Contribution			to Fees
Zip	Country	Z _I p		Countr	'n		8. This corporation owes or has	paid the cu		
24	25	29		30			Personal Property Tax due Jur			No No
	9. Name and Address of Cu	urrent Registered A	gent	···· · · · · · · · · · · · · · · · ·			10. Name and Address of New F		Agent	
D/	AVILA-MEDRANO, ROSEMARY	1		81	ī	Name	*			
	43 COLLINS AVE	•			+	Charact Address	ss (P.O. Box Number is Not Accept			
	IAMI BEACH FL 33141		82 Street Ad			Street Addres	ss (P.U. Box number is not Accept	abiej		
••••				83	3					
					1					
				84	1	City		FI	85 Zip	Code
11 Purcuant	to the provisions of Sections 607	0602 and 607 1509	Elorida Statut	oc the abov	بل	named corns	ration automits this statement for the		e	
office or	registered agent, or both, in the S	State of Florida. Such	change was a	authorized b	ye.	the corporatio	ration submits this statement for the n's board of directors. I hereby acc	ept the ap	pointment as	is registered s registered
agent. 1 a	am familiar with, and accept the c	obligations of, Section	n 607.0505, Flo	orida Statute	98.		•			Ū
SIGNATURE		- , ,								
12.	Signature, typed or printed name of registers	AND DIRECTORS	le (NOTI		pent	t signature required		DATE	D DIDEOTO!	00.0140
TITLE	D	MINUTINECTORS	DELETE	13.	,		ADDITIONS/CHANGES TO OFF	ICERS AN	Change	Addition
NAME	DAVILA-MEDRANO, ROSE	EMADV	L.J DECENE			1			L Change	L AUGILION
	7143 COLLINS AVE	SMANT		1.2 NAME						
STREET ADDRESS				1.3 STREE						
CITY-ST-ZIP	MIAMI BEACH FL 33141		Deceme	1.4 CITY-	ST-	- ZIP			T 1 61	11.000
TITLE			☐ DELETE	2.1 TITLE					Change	Addition
NAME				2.2 NAME						
STREET ADDRESS	1			2.3 STREE	T AI	UDDRESS				
CITY-ST-ZIP	<u></u>			2. 4 CITY-	\$1-	- ZiP				
TITLE			DELETE	3.1 TITLE					Change	☐ Addition
NAME				3.2 NAME						
STREET ADDRESS	1			3.3 STREE	TAI	UDDRESS				
CITY-ST-ZIP				3.4. CITY-	ST-	:-ZIP				
TITLE			DELETE	4.1 TITLE		1			☐ Change	Addition
NAME	1			4. 2 NAME						
STREET ADDRESS				4.3 STREE	TAI	DDRESS				
CITY-ST-ZIP				4.4 CITY-						
TITLE			DELETE	5.1 TITLE					Change	Addition
NAME				5.2 NAME		1				
STREET ADDRESS				5.3 STREE		IDDRESS				
CITY-ST-ZIP TITLE			DELETE	5.4 CITY-1	Sf-	- ZIP			Change	A Jane
			L. DELETE	6.1 TITLE		ł			∟ Unange	Addition
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREET	T AE	DDRESS				
CITY - ST. 7IP	1			£4 CITY	ст	710				

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 suppliemental 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

X 3-15-98