

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 17 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000065462 (1)

1. Corporation Name

JUPITER I MEDICAL EQUITY CORPORATION

Principal Place of Business

1500 CORPORATE CENTER WAY
SUITE 203
WELLINGTON FL 33414

Mailing Address

1500 CORPORATE CENTER WAY
SUITE 203
WELLINGTON FL 33414

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/06/1994

3a. Date of Last Report

2. Principal Place of Business

21 1200 CORPORATE CTR WAY

2a. Mailing Address

26 1200 CORPORATE CTR WAY

Suite, Apt. #, etc.

22 #100

Suite, Apt. #, etc.

27 #100

City & State

23 WEST PALM BEACH FL

City & State

28 WEST PALM BEACH FL

Zip

24 33414

Country

25 PALM BEACH

Zip

29 33414

Country

30 PALM BEACH

4. FEI Number

65-0524944

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DASCO DEVELOPMENT CORPORATION
1500 CORPORATE CENTER WAY
SUITE 203
WELLINGTON FL 33414

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1200 CORPORATE CTR WAY

83 #100

84 City

WEST PALM BEACH

FL

85 Zip Code
33414

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 then if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

RENDINA, BRUCE A

% 1500 CORPORATE CENTER WAY, STE. 203
WELLINGTON FL 33414

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

☒ Change ☐ Addition

1200 CORPORATE CTR WAY #100
WEST PALM BEACH FL 33414

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☒ Change ☐ Addition

1200 CORPORATE CTR WAY #100
WEST PALM BEACH FL 33414

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 its 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:

Donald A. Sands, Vice President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Plate #