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FILED

Apr 10 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 # P94000079961 (6)

1. Corporation Name  
BARIATRIC ASSOCIATES, INC.

Principal Place of Business  
3200 FEDERAL HIGHWAY  
BOCA RATON FL 33461  
US

Mailing Address  
601 S. SEMORAN BLVD.  
ORLANDO FL 32807

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/28/1994

4. FEI Number

59-3277796

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

2. Principal Place of Business

21 142 S. Semoran Blvd.

22 Suite, Apt. #, etc.

23 City & State

23 Orlando, Fl

24 Zip 32807

25 Country

2a. Mailing Address

26 142 S. Semoran Blvd.

27 Suite, Apt. #, etc.

28 City & State

28 Orlando, Fl.

29 Zip 32807

30 Country

9. Name and Address of Current Registered Agent

GREENE, RANDALL B  
601 S SEMORAN BLVD  
ORLANDO FL 32807

10. Name and Address of New Registered Agent

81 Name

Schwartz, William H.

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

142 S. Semoran Blvd.

83

84 City

Orlando

FL

85 Zip Code

32807

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

*William H. Schwartz*

*William H. Schwartz*

3-4-98

Signature typed or printed name of registered agent and title if applicable

(Not for Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME GREENE, RANDALL B  
STREET ADDRESS 601 SEMORAN BLVD  
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
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CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

P/T/S/D

☐ Change ☒ Addition

12 NAME

Schwartz, William H.

13 STREET ADDRESS

142 S. Semoran Blvd.

14 CITY-ST-ZIP

Orlando, Fl. 32807

21 TITLE

~~VP~~

☐ Change ☒ Addition

22 NAME

~~Seman, Linda M.~~

23 STREET ADDRESS

~~142 S. Semoran Blvd.~~

24 CITY-ST-ZIP

~~Orlando, Fl. 32807~~

31 TITLE

☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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: *William H. Schwartz* William H. Schwartz 407-380-1951

CR2E034 (10/97)