

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000089771 (7)

1. Corporation Name

CONCORDE OF FORT LAUDERDALE, INC.



Principal Place of Business

4515 N. STATE RD. 7  
LAUDERDALE LAKES FL 33319

Mailing Address

4515 N. STATE RD. 7  
LAUDERDALE LAKES FL 33319

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

REILY, WILLIAM B  
4515 N. STATE RD. 7  
LAUDERDALE LAKES FL 33319

3. Date Incorporated or Qualified

12/09/1994

3a. Date of Last Report

08/01/1995

4. FEI Number

APPLIED FOR 65-0614588

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

10. Name and Address of New Registered Agent

81

Name

STUART S. ROSENIHAL, ESQ.

82

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

800 East Cypress Creek Road, Suite 303

83

84

City

Fort Lauderdale

FL

85

Zip Code

33334

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 held if applicable

(NOTE: Registering Agent's signature required when registering)

DATE

4/1/96

12. OFFICERS AND DIRECTORS

TITLE

PD

GICHON, GADI

138 NURMI DR.

FT. LAUDERDALE FL 33301

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

VD

SHADE, GAVRIEL

4515 N. STATE RD. SEVEN

LAUDERDALE LAKES FL 33319

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

STD

REILY, WILLIAM B

4515 N. STATE RD. SEVEN

LAUDERDALE LAKES FL 33319

☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

☐ DELETE

NAME

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CITY- ST- ZIP

TITLE

☐ DELETE

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)(k), 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 B. Reily

William B. Reily

4/1/96

(954) 733-6183

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2E034 (12/95)