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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400092710 (0) MELBOURNE AMBULATORY SURGERY CENTER, INC.

Principal Place of Business Mailing Address 1430 8 PINE 87 1430 8 PINE 87 MELBOURNE FL 32001 MELBOURNE FL 32001			119				
				3. Date incorporated or Quali 12/22/1994		e of Last Re 1/1996	eport
	Place of Business	2a. Mailing Address		4. FEI Number 59-3284516	· · · · · · · · · · · · · · · · · · ·	<u> </u>	plied For
Suite, Apl	#, etc.	Suite, Apt #, etc.				\$8.75 A	t Applicable
22		27		5. Certificate of Status Desire	d 🗀	Fee Re	
City & State 23	ee	City & State		6. Election Campaign Financi Trust Fund Contribution	ng . 🗀	\$5.00 Added t	
Zip	Country	Zip	Country	8. This corporation has liabilit	y for intangible t	ax under s.	199.032,
24	25) 9. Name and Address of Cur	rent Registered Agent	[30]	Florida Statutes 10. Name and Address of Ne	Yes X		
QII A	AS, CHARLES J M.D.	tent tredistrated Adott	81 Name	10, manie and Address of Ne	M Ledistelec V	gent	
	S PINE ST			·			
MELBOURNE FL 32001			82 Street Ad	dress (P.O. Box Number is Not Acc	eptable)		
			83		······································		
			84 City	·		85 Zip C	^ode
			1 1 - 1	rporation submits this statement for ation's board of directors. I hereby	FL	1 .	
SIGNATURE 12. TITLE	Signature figure or product nation of registered OFFICERS	AND DIRECTORS DELETE	TE: Registered Agent signature req. 13.	ulred when reinstating) ADDITIONS/CHANGES TO (DIRECTOR:	S IN 12
†⊮AME	ZABINSKI, PETER		1,2 NAME				
STREET ADDRESS	1405 S PINE ST MELBOURNE FL 32901		1.3 STREET ADDRESS				
CHY-ST 74P Total	S S	DELETE	1.4 CITY-ST-ZIP 2.1 TIFLE			Change	Addition
NAME	NELSON, HENRY N	_ occin	i i		L		T Vaginali
	738 MALIBU LANE		E 2.2 NAME				
STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS	:			
STREET ADDRESS CITY+S1+7IP	INDIALANTIC FL 32903		I 1	:	ger 🞉		
CITY+S1+7IP TILLE	INDIALANTIC FL 32903	DELETE	2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE	: 		Change	Addition
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Secretary of State