

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 13 1997 8:00am
Secretary of State

DOCUMENT # P95000000545 (0)

1. Corporation Name

NEUROSURGICAL EMERGENCY GROUP, P.A.

Principal Place of Business

7130 W 20 AVE

#200

HALEAH FL 33016

US

Mailing Address

7130 W 20 AVE

#200

HALEAH FL 33016-3331

US

3. Date Incorporated or Qualified

01/04/1995

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

11760 BIRD ROAD

Suite, Apt., etc.

641

City & State

MIAMI FL

Zip

33175

Country

U.S.A.

2a. Mailing Address

11760 BIRD ROAD

Suite, Apt., etc.

641

City & State

MIAMI FL

Zip

33175

Country

U.S.A.

4. FEI Number

65-0553970

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

JOY, JOSE L
7130 W 20 AVE #200
#400-
HALEAH FL 33016

10. Name and Address of New Registered Agent

81 Name

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

11760 BIRD ROAD #641

83

84 City

MIAMI

FL

85 Zip Code

33175

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 607.0605, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ DELETE
PVT	JOY, JOSE L DR	1921 N.W. 14TH ST. #400-	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	☒ Change ☐ Addition
		11760 BIRD ROAD #641	MIAMI, FL 33175	

4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	☐ Change ☐ Addition
		700002189267	-05/23/97--01006--027	
		***550.00		

5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	☐ Change ☐ Addition

6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	☐ Change ☐ Addition
		300002189243	-05/23/97--01006--000	
		***175.75		

14. I do hereby certify that the information supplied with this filing 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE L. JOY, PRESIDENT 1/27/97 305-225-1777

Date

Daytime Phone

0124920

CR2E034 (9/96)