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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # P9500 M. NENSEY, M.D., P.A.	00005706 (3	3)	
Principal Place of Business Mailing Address				
6719 GALL BOULEVARD SUITE 203 ZEPHYRHILLS FL 33541 6719 GALL BOULEVARD SUITE 203 ZEPHYRHILLS FL 33541 EPHYRHILLS FL 33541				DO NOT WRITE IN THIS SPACE 3, Date Incorporated or Qualified
2. Principal P	Place of Business	2s. Mailing Address		01/01/1995 4. FEI Number Applied For
21		├ ┪		59-3284825 Not Applicab
		Suite, Apt. #, etc.		5 Conditional Status Desired S8.75 Additional
City & Stat				Fée Required
23	ti .	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip	Country	7φ	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. 🔀 Yes 🔲 No
	9. Name and Address of Curr	rent Registered Agent	81 N	10. Name and Address of New Registered Agent Name
11. Pursuant office or ragent. I a	to the provisions of Sections 607 C egistered agent, or both, in the Stam familiar with, and accept the ob	1502 and 607, 1508. Florida State of Florida Such change willigations of, Section 607,0505	atules, the above-na as authorized by the	City FL 85 Zip Code amed corporation submits this statement for the purpose of changing its registere the corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of a pictered	agent and title if applicable	(NOT: Registered Agent sig	signature required when reinstating) DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME	P NEW VAIATED	DELETE	1.5 TITLE 1.2 NAME	Change
STREET ADDRESS	NENSEY, YAWER 6719 GALL BLVD #203		1.3 STREET ADD	ORFSS
CITY-ST-ZIP	ZEPHYRHILLS FL		1.4 CITY - ST - ZIF	1
TITLE		DELETE	21 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADD	
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY - ST - ZI 3.1 TITLE	ZIP Change Addition
NAME		(3.2 NAME	- Change - Notific
STREET ADDRESS			3 3 STREET ADD	DRESS
CITY-ST-ZIP			3.4. CITY-ST-ZI	ZIP
TITLE		☐ DELETE	4.1 TITLE	Change Addition
			4, 2 NAME	
STREET ADDRESS			4.3 STREET ADD	
CITY-ST-ZIP TITLE		DELETE	4.4 City-St-Zie 5.1 Title	Change Addilic
NAME			5.2 NAME	Citally L. Adullic
STREET ADDRESS			5.3 STREET ADD	DRESS
CITY-ST-ZIP			5.4 CITY - ST - ZIP	
TITLE		☐ DFLETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDR	DRESS
CITY OT THE			CARITY CT 70	un

14. Thereby certify that the information supplied with his 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 giport 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 economic annual giport 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 economic annual giport 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 economic annual giport 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 economic annual giport 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 economic annual giport 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 economic annual giport 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 economic annual giport 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 economic annual giport is true and accurate and that my signature shall have the same legal effect as if made under oath; the economic annual giport is true and accurate and that my signature shall have the same legal effect as if made under oath; the economic annual giport is true and accurate and the economic annual giport is true and accurate and the economic annual giport is true a