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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name P95000049305 (2)

NEIGHBORHOOD MEDICAL PLAZA INC.

## **FILED** Apr 24 1998 8:00am Secretary of State



						TO BE A STATE OF THE STATE OF T
Principal Place of Business Mailing Address						
804 VERONA LAKE DR. FT. LAUDERDALE FL 33326		804 VERONA LAKE DR. FT. LAUDERDALE FL 33326		DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified 06/23/1995	
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		65-0600633	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zιp	Cour	ntry	8. This corporation owes or has paid the cu	urrent year Intangible
24	25	29	30		. braditar report, to the total	Yes No
	g. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered	Agent
PEREZ. AMELIA				81 Name		
804 VERONA LAKE DRIVE				82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33326				O. O. O. C.	arous (river boxettamber to treet to opinion)	
• •				83		
						85 Zip Code
			ľ	84 City	FI	85 Zip Code
11. Pursuan office or agent. I	t to the provisions of Sections 607.0 registered agont, or both, in the Starm familiar with, and accept the ob-	.502 and 607.1508, Florida Stati ate of Florida. Such change was ligations of, Section 607.0505, I	ules, the ab s authorized Florida Statu	ove-named co by the corpor ites.	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE	Signature, typod or printed name of migistored	accent and title if applicable (N	Q1£ Registered	Agent signature rec	guired when reinstating) DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	I P	DELETE	1,1 TiT	LE		Change Addition
NAME	PEREZ, AMELIA		1.2 NAI	ME		
STREET ADDRESS	804 VERONA LAKE DRIVE		1.3 ST	REET ADDRESS		
CITY - ST - ZIP	FT. LAUDERDALE FL 3332	3	1.4 CIT	Y-ST-ZIP		
TITLE		DELETE	21 111	LĒ		Change Addition
NAME			2.2 NA	ME		
STREET ADDRESS			2.3 \$10	REET ADDRESS		
CITY-ST-ZIP			2. 4 Ci	TY-ST-ZIP		
TITLE		DELETE	31 TIT	LE	1	☐ Change ☐ Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 ST	REET ADDRESS		
CITY-ST-ZIP				TY-ST-ZIP		
TITLE		☐ DELETE	4.1 TIT			Change Addition
NAME			4. 2 N	ME		
STREET ADDRESS			4.3 ST	REET ADDRESS		
CITY-ST-ZIP				Y-ST-21P		
TITLE	-	DELETE	5.1 TIT		***************************************	Change Addition
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 \$1	REET ADDRESS		
CITY-ST-ZIP				Y-\$1-ZIP		
TITLE	<del>                                     </del>	DELETE	6.1 TIT			☐ Change ☐ Addition
NAME			6.2 NA		•	
STREET ADDRESS	, [			REET ADDRESS		
	<b>'</b> [			Y-ST-ZIP		
CITY-ST-ZIP	<del></del>	1 (1) (1) (1)	0.4 (1)		in Contine 110 07/2Vi) Florida Statutos I further	cortifu that the information

ne legal effect as if made under oath; that I am an Plorida Statutes; and that my name appears in

SIGNATURE: