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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

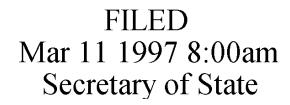
1997

DOCUMENT # **P95000060733 (9)**

BETTI HERTZBERG, M.D., P.A.

Principal Place of Business

Mailing Address





| 8930 S.W. 115TH TERRACE MIAMI FL 33173 | | | 8930 S.W. 115TH TERRACE Miami FL 33178-4334 | | · | | |
|---|--|---|--|---|--|---|------------------------------|
| | | | | | 3. Date Incorporated or Qualified 08/08/1995 | 3a. Date of Last F 05/01/1996 | Report |
| 2. Principal Pia | ice of Business | 2a. Mailing Addres | s | | 4. FEI Number | A | pplied For |
| 21 | | 26 | | | 65-0599188 Not Applicab | | |
| Suite, Apt # | , etc | Suite, Apt. #, el | tc. | | 5. Certificate of Status Desired Section Fee Regulred Fee Regulared | | |
| City & State | | City & State | | | Election Campaign Financing Trust Fund Contribution Added to Fees | | |
| Z(p) | Country 25 | Zip Country 29 30 | | | 6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | | |
| | 9. Name and Address of Cu | rrent Registered Agent | | | 10. Name and Address of New Re | gistered Agent | |
| HER1 | zberg, betti | | 8 | Name | | | |
| 8930 S.W. 115TH TERRAE MIAMI FL 33173 | | | 8 | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | 8 | 3 | | | |
| | | | 8 | City | | FL 85 Zip | Code |
| 11. Pursuant to office or relagent. Lan | i the provisions of Sections 607 gistered agent, or both lin the 5 i familiar with, and accept the o | .0502 and 697,1508, Florida State of Florida Such change abligations of, Section 607.06 | Statutes, the abo e was authorized t 505, Florida Statut | ve-named corp by the corpora as. | poration submits this statement for the p ation's board of directors. I hereby accep | urpose of changing i at the appointment as | its registered registered |
| | Transcorption pended name of repoten | | | gent signature requ | ired when reinstating) | DATE | |
| 12. | OFFICERS D | S AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFIC | | |
| II'U | • | [] DELE | | | Hortzberg, Bet | Change | |
| NAME | HERTZBERG, BETTI M D 8930 S.W. 115TH TERRAC | \c | 1.2 NAM | 1 1 | | | |
| STREET FADORESS | MIAMI FL 33173 | Æ. | | ET ADORESS < | 8930 SW 1151 | h Tem | 100 |
| CHY-SI-ZIF | MIAMITE 30173 | DELE | 1.4 CITY | | MIAMI FI | ☐ Change | 2 ☐ Addition |
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| NAME OTOLET ADODLES | | | | T ADDRESS | | | |
| STREET ANORESS | | | 2 3 SIME 2 4 CITY | · · · · · · · · · · · · · · · · · · · | | | |
| OFY -ST-ZIP TOLE | | DELE | | | | ☐ Change | ☐ Addition |
| NAME | | | 3.2 NAM | : | | | |
| STREET ADOLESS | | | 3.3 STRE | ET ADORESS | | | |
| CHIY-SL-ZIP | | | 3.4. CITY | -ST-ZIP | | | |
| 1016 | | DELE | TE 4.1 TITLE | | | Change | Addition |
| NAME | | | 4. 2 NAM | E | | | |
| \$TEGET ADJUITES | | | 4.3 STRE | ET ADDRESS | | | |
| CHY-S1 20 | | | 4.4 CITY | ST-ZIP | | | |
| LITER | | ☐ DELE | | í | | Change | Addition |
| NAME | | | 5 2 NAM | | | | |
| STREET ADORESS | | | 1 | ET ADDRESS | | | |
| City-St 7 | | S.F. F | 54 CiTY | | | | paan. |
| THILF | | ☐ DELE | f | í | | L Change | Addition |
| NAME | | | 6 2 NAM | 1 | | | |
| STALL LADDRESS | | | 6.3 STRE | ET ADORESS | | | |
| | | | 6.4 CITY | ı | | | |

civer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and

SIGNATURE: