SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000076483 (3)

AUDIOMETRIC HEARING CENTER OF LARGO, INC.

APPROVED AND FILED

1996 SEP -4 PM 2: 53

SECRETARY OF STATE TALLAHASSEE. FLORIDA



Principal Place of Business Mailing Address					
12947 WALSINGHAM RD. LARGO FL 34644		12947 WALSINGHAM RD. LARGO FL 34644			
				3. Date incorporated or Qualified 10/01/1995	3a. Date of Last Report
21	Place of Business	2a. Mailing Address 26		4. FEI Number 59-3334626	Applied For Not Applicable
Suite, Apt.		Suite Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State 28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199 032, Yes \text{ \text{ No.}
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Reg	
12 LA	EW, EDWARD J 947 WALSINGHAM RD. RGO FL 34644		83 84 City	dress (P.O. Box Number is Not Acceptable	F1 85 Zip Cade
11. Pursuant office or ragent. La	to the provisions of Sections 607, registered agent, or both, in the Si im familiar with, and accept the ob-	0502 and 607 1508, Florida Statutes ate of Florida, Such change was an oligations of, Section 607.0505, Flori	s, the above-named corp thorized by the corporation Statutes	poration submits this statement for the purion's board of directors. Thereby accept t	
SIGNATURE	Signature type for protect came of registerac	dans lander des des acom			
12.		AND DIRECTORS	Bog derud Agent signalunt nuqu	ADDITIONS/CHANGES TO OFFICE	PS AND DIDECTORS IN 10
TITLE	President	DELETE	1.1 101(6	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	Edward J. Mew	1-1-1	1.2 NAME		change Addition
STREET ADDRESS	12947 Walsingham	Rd.	1 3 STHEET ADDRESS	ICC COLUMN	atti kirili kita kita atti kitti atti kitti kitti
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STREET ADDRESS			3 3 STREET ADDRESS		
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CITY-ST-ZIP			5.3 STREET ADDRESS		
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NAME		welle	i		Change
STREET ADDRESS			6.2 NAME		1/2/2 P. M
CITY-ST-ZIP			6.3 STREET ADDRESS		, Olya,
	by certify that the information supp	blied with this filling is voluntarily furn	-Shed and does not over	of for the overall and the Control	Υ (:

further certify that the information indicated on this arrival report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE ND TYPE TEO NAME OF SIGNING OFFICER OR DIRECTOR