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FILED

Apr 07 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000082593 (1)

1. Corporation Name

JOSE RAMON MARTIN CORPORATION



Principal Place of Business

1820 SOUTH WEST 82 AVE.  
MIAMI FL 33155

Mailing Address

1820 SOUTH WEST 82 AVE.  
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

10/27/1995

4. FEI Number

65-0620271

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



Yes

No

2. Principal Place of Business

21 2473 N.W. 7th Street

Suite, Apt. #, etc.

22 N/A

City & State

23 Miami, Florida

Zip

24 33125

Country

25 Dade

2a. Mailing Address

26 2473 N.W. 7th St.

Suite, Apt. #, etc.

27 N/A

City & State

28 Miami, Florida

Zip

29 33125

Country

30 Dade

9. Name and Address of Current Registered Agent

MARTIN, JOSE R  
1820 SOUTH WEST 82 AVE.  
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

JOSE RAMON MARTIN M.D.

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

2471 N.W. 7th Street

83

84 City

Miami

FL

85 Zip Code

33125

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 607.0505, Florida Statutes.

SIGNATURE Jose R. Martin M.D.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

03-04-98

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME MARTIN, JOSE R  
STREET ADDRESS 1820 SOUTH WEST 82 AVE.  
CITY-ST-ZIP MIAMI FL 33155

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE President ☒ Change ☐ Addition

12 NAME Jose R. Martin  
13 STREET ADDRESS 2473 N.W. 7th Street  
14 CITY-ST-ZIP Miami, FL 33125-3150

21 TITLE ☐ Change ☐ Addition

22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this 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 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.

CR2E034 (10/97)

DEP. \$150.00