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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500086501 (0)

JORGE J. BUSTAMANTE, M.D., P.A.

Principal Place of Business Mailing Address 8112 STEEPLECHASE DR 8112 STEEPLECHASE DR PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/02/1995 2. Principal Place of Business 2a, Mailing Address 4, FEI Number Applied For 21 65-0633512 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Zip Country Z_{1D} Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes ☐ No 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LIOCE, DOMENICK R 1645 PALM BEACH LAKES BLVD, SUITE 1200 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33401 83 84 Zip Code 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** (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change ■ Addition TITLE 1.1 TITLE **BUSTAMANTE**, JORGE J NAME 1.2 NAME 8112 STEEPLECHASE DR STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP 14 CITY - ST - ZIP DELETE Change Addition TITLE 21 1|TLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-S1-ZIP DELETE Change Addition 3.1 THILE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS

6.4 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 or an attachment with an address.

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

DELETE

ock 12 or Block 13 if changed, or of an attachment with an address.

4/2-1

TWI-624-4-46

☐ Change

Change

Change

Addition

Addition

Addition

FILED

May 13 1998 8:00am

Secretary of State