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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## OCUMENT # P96000038817

...... M. BRIDGES, M.D., P.A.

## **FILED** Mar 10, 1999 8:00 am Secretary of State 03-10-1999 90085 044 \*\*\*150.00



: Place of Business	Mailing Address			en iten inim inimi iteli iteli iteli
.ake worth RD Suite 211 Worth FL 33467	6801 LAKE WORTH RD SUF	TE 211		
WORTH FE 35467	LAKE WORTH FL 33467		DO NOT WRITE IN TH	IS SPACE
			3. Date Incorporated or Qualifed	
			04/30/1996	}
incipal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	26		65-0656760	Not Applicable
::., Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
, & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Country	Zip	Country	8. This corporation owes the current year le	ntangible
25	<del></del>	30	Personal Property Tax.	. ☑Yes □No
9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	d Agent
ROBERTS, ERIC V		81 Name	· · · · ·	ŧ
11211 S MILITARY TRAIL #3821		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
BOYNTON BEACH FL 33436		<u> </u>		
BOTHTON BEACHTE 00400		83		
		84 City		85 Zip Code
in the provisions of Sections 507 050	2 and 607 1509. Florida Statutor	the oboug period corn	oration submits this statement for the purpose of	
or registered agent, or both, in the State	of Florida. Such change was aut	horized by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appoint	ointment as registered
I am familiar with, and accept the obligat	tions of, Section 607.0505, Florid	da Statutes.		
Signature, typed or printed name of registered agen	of and this if applicable (NOTE: E	Registered Agent signature require	d when reinstating) DATE	
	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
CP	☐ DELETE	1.1 TITLE	ADDITIONOS OF FRANCES TO OF FROERS	AND DIRECTORS IN 12
BRIDGES, DIANA M		1.2 NAME		
11211 S. MILITARY TR. #3821		1.3 STREET ADDRESS		R2E034
BOYNTON BEACH FL 33463		1.4 CITY-ST-ZIP		1 2
VIS	DELETE	2.1 TITLE	<del></del>	☐ Change ☐ Addition ☐
ROBERTS, ERIC V		2.2 NAME		
11211 S. MILITARY TR #3821		2.3 STREET ADDRESS		
BOYNTON BEACH FL 33463		2.4 CITY-ST-ZIP		
	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
		3.2 NAME	,	
33		3.3 STREET ADDRESS		
		3.4. CITY-ST-ZIP		
	☐ DELETE	4.1 TITLE		Change Addition
		4.2 NAME	•	
22		4 3 STREET ADDRESS	•	
		4.4 CiTY-ST-ZIP		
	☐ DELETE	5.1 TITLE	·	Change Addition
		5.2 NAME	<i>,</i> • • • • • • • • • • • • • • • • • • •	,
		5.3 STREET ADDRESS		
<u> </u>		5.4 CITY-ST-ZIP		
(	☐ DELETE	6.1 TITLE	<del></del>	☐ Change ☐ Addition
(		62 NAME	•	
23		6.3 STREET ADDRESS		
<u> </u>		6.4 CITY-ST-ZIP		

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 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 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR BIRECTOR