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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000054128 (9)

JERSEY CITY DIALYSIS CENTER, INC.

Principal Place of Business Mailing Address							ill iong i dinii giddi fid	JA u (180) (41) (41)	
7081 CYPRES SUITE 104 PLANTATION	S ROAD FL \$3317-2243	7061 CYPRESS ROAD SUITE 104 PLANTATION FL 33317-2				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 06/25/1996			
	lace of Business	2a. Mailing Address				4, FEI Number		Applied For	
Suite, Apt.	# olc	Suite, Apt. #, etc.	···········			65-0740003	<u> </u>	Not Applicable 75 Additional	
22		27				5. Certificate of Status Desired	Fe	e Required	
City & State	€	City & State				Election Campaign Financing Trust Fund Contribution		.00 May Be	
Zip Country		28				Trust Fund Contribution This corporation owes or has pair			
24	25	29	30			Personal Property Tax due June		ar intangibie ☐ No	
	g, Name and Address of Currer					10. Name and Address of New Re			
	RRIER, VICKI		8	31	Name				
	31 CYPRESS ROAD		8	32	Street Addres	ss (P.O. Box Number is Not Acceptab	ole)		
SUITE 104				33					
PLA	ANTATION FL 33317-2243		1	13					
			8	34	City		FL 85	Zıp Code	
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	ites, the abo		-named corpor	ration submits this statement for the p		ina its registere	
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was	authorized	by t	the corporation	n's board of directors. I hereby accep	of the appointmen	it as registered	
•	Thighing with and according cong	lations of abotion out, outo, in	IOTIUA OTATUT	its.					
SIGNATURE	Signature, typod or printed name of registered age	ont and title d applicable (NO	Ti - Registered A	Agent	it signature required	when reinstating)	DATE		
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	PD	☐ DELETE	1.1 TITLE	E	_		☐ Cha	inge 🔲 Additio	
NAME	SPIRA, LAWRENCE R	44.4	1.2 NAM	1E	}				
STREET ADDRESS	7061 CYPRESS ROAD., STE				ADDRESS				
CITY-ST-ZIP	PLANTATION FL 33317-2243	DELETE	1.4 CITY		- ZIP		Cha	Inge Additio	
TITLE NAME	BURRIER, VICKI		2.1 TITLE 2.2 NAM					iligo 🗀 ruunio	
STREET ADDRESS	7061 CYPRESS ROAD., STE	104	2.2 NAM 2.3 STRE		INNBECC				
CITY-ST-ZIP	PLANTATION FL 33317-2243	101	2.3 STRE		1				
TITLE		DELETE	3.1 TITLE		-211		☐ Cna	inge Additio	
NAME			3.2 NAM					•	
STREET ADDRESS			3 3 STRE	EET AT	ODRESS				
CITY-ST-ZIP			3.4. CiTY	Y-ST-	- 7(P				
TITLE		DELETE	4.1 TITLE	E		·	☐ Chai	nge 🔲 Additio	
NAME			4. 2 NAM	Æ)				
STREET ADORESS			4.3 STRE						
CITY-ST-ZIP		Delete	4.4 CITY		- ZIP		Cha	nan Additio	
TITLE		☐ DELETE	5.1 TITLE				☐ Cha	nge L Additio	
NAME STOCET ADDRESS			5.2 NAMI		nnnree				
STREET ADDRESS City-St-Zip			5.3 STRE 5.4 CITY						
TITLE		DELETE	6.1 TrTLE		·ZIF		☐ Chai	nge Addilio	
NAME			6.2 NAM					• –	
STREET ADORESS			6.3 STRE		DDRESS				
CITY-ST-ZIP			6.4 CITY		i				
14 hereby c	ertify that the information supplied w	vith this filing does not qualify f	for the exem	nntic	on stated in Se	ection 119.07(3)(i), Florida Statutes I shall have the same legal effect as if	further certify tha	t the information	
officer or o	on this armual report of suppliements director of the corporation or the roce or Block 13 if changed, or on an atta	eiver or trustee empowered to	execute this	er si	port as require	ed by Chapter 607, Florida Statutes;	and that my name	a appears in	

1/0/00