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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000076560 (7)

PREMIER INTERNAL MEDICINE ASSOCIATES, P.A.

Principal Place of Business

Mailing Address

FILED Feb 04 1997 8:00am Secretary of State



1104 77TH STREET COURT N.W. BRADENTON FL 34209	1104 77TH STREET COURT N.W. Bradenton Fl 34209-1051					
				3. Date incorporated or Qualified 09/13/1996	3a. Date of Last F	Report
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	_	oplied For
21 3701 CORTEZ ROAD W	• 26			65-069342	3	ot Applicable
Suite, Apl. #, etc.	Suite. Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75	Additional equired
City & State	Cily & State			6. Election Campaign Financing	\$5.00	May Be
23 BRADENTON FL	28			Trust Fund Contribution		to Fees
Zip Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032,		
24 34210 25 USA	29	30		Florida Statutes 🔲 Yes 🔀 No		
9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	pistered Agent	
ARROJO, MARTA		B1	Name			
1104 77TH STREET COURT N.W.			Street Address	ss (P.O. Box Number is Not Acceptab	امار)	
BRADENTON FL 34209			Oliest Addie	as (r.o. box realmost is real recorpial	10)	1
DIVIDEITION (C 0 1000		83				
		11_			11	
		64	City		FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607.050	2 and 607 1508. Florida Statut	es the above-r	named corno	ration submits this statement for the n		ts registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	of Florida, Such change was a	authorized by th	he corporatio	n's board of directors. I hereby accer	t the appointment as	registered
SIGNATURE						
Signature, typed or punted name of registered age		E Registered Agent	signature required		DATE	20.01.40
12. OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change	Addition
TITLE D	L) DELETE	1.1 TITLE			E Change	L Addition
NAME ARROJO, GUSTAVO B M.D.	LA.	1.2 NAME				ŀ
STREET ADDRESS 1104 77TH STREET COURT N.	.w.	1.3 \$TREET AC	DORESS			
CHY-SI-ZIP BRADENTON FL 34209		1.4 CITY - ST -	ZIP			
TITLE	L_J DELÉTE	21 TITL€			Li Change	Addition
NAME		2.2 NAME				
STREET ADDRESS			DDRESS			
City-St-ZiP						
TITLE	DELETE:				Change	Addition
NAME					5	ŀ
STREET ADDRESS		3.3 STREET AL	DDAESS			
CITY- ST- ZIP		3.4. CITY - ST-	- ZIP			
TOLE	☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME		4. 2 NAME	j			
STREET ADDRESS		4.3 STREET AC	DORESS			ļ
CITY-SI-ZIP		4.4 CITY - ST-	ZIP			
TITLE	DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET AL	hopsee			
C(TY+S1+Z(P		D.O OTHER I ME	DUNCOO I			
TITLE	☐ OELĒTE	5.4 CITY-ST- 6.1 TITLE			☐ Change	Addition
	☐ OEŧ€1E	5.4 CITY-ST- 6.1 TITLE			☐ Change	Addition
NAME	DELETE	5.4 CITY-ST- 6.1 TITLE 6.2 NAME	ZIP		☐ Change	Addition
	DELETE	5.4 CITY-ST- 6.1 TITLE	DDRESS		☐ Change	Addition

information indicated on this annual re I am an officer or director of the corpo appears in Block 12 or Block 13 if cha r supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under of or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name

SIGNATURE:

)751-0051