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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000081768 (9) DOCUMENT #

MEDICAL ADVISORY SERVICES, INC.

**FILED** Feb 02 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Ad	ddress							
2435 HOLLY	WOOD BLVD	2435 HO	LLYWOOD BLVD							
SUITE 204			SUITE 204							
HOLLYWOOD FL 33020		HOLLYWO	HOLLYWOOD FL 33020				DO NOT WRITE IN THIS SPACE			
						<ol> <li>Date Incorporated or Qualifie</li> <li>09/30/1996</li> </ol>	d			
2. Principal P	Place of Business	2a. Mailing	Address			4. FEI Number		A	pplied For	
21		26				65-0698757		N	lot Applicable	
Suite, Apt.	#, etc.	Suite, /	Suite, Apt. #, etc.			E Continue of Status Desired		\$8.75	Additional	
22		27				5. Certificate of Status Desired		Fee R	lequired	
City & Stat	е	City &	City & State			6. Election Campaign Financing	6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip		Country	'	8. This corporation owes or has	paid the cu	irrent year in	tangible	
24	25	29	30	0		Personal Property Tax due Ju	ne 30.	Yes [	_ No	
	9. Name and Address of Curr	rent Registered A	gent	81		10. Name and Address of New	Registered	Agent		
JEWETT, CHARLES E					Name	9				
2435 HOLLYWOOD BLVD				82	Street	t Address (P.O. Box Number is Not Accep	table)			
SL	JITE 204					r Address (F.O. Box Number is Not Accep	iabio)			
НС	DLLYWOOD FL 33020			83						
				84	City		FL	<b>85</b> Zip	Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508	Florida Statutes	the above	e-nameo	corporation submits this statement for th	nurnose (	of changing it	its registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, 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	Signature, typed or printed name of registered	agent and title if applicable	0 (NOTE: F	legistered Ago	nt signatur	re required when (einstating)	DATE	· · · · · · · · · · · · · · · · · · ·		
12.	OFFICERS A	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTOR	RS IN 12	
TITLE	-0-		DELETE	1.5 TITLE				Change	Addition	
NAME	<del>Jewett, Charles e</del>			1.2 NAME						
STREET ADDRESS	-2435 HOLLYWOOD BLVD			1.3 STREET	ADDRESS				1	
CITY-ST-ZIP	HOLLYWOOD FL 33020			1.4 CiTY - S	I - ZIP				ı	
TITLE	PRESIDENT EDWARD JEWETT 0435 HOLLYMOOD (		☐ DELETÉ	2.1 TITLE				Change	Addition	
NAME	ENWARD STEWETT			2.2 NAME						
STREET ADDRESS	ALZ CHOLLYWOOD (	200 #204	<b>(</b>	2.3 STREET	ADDRESS					
CITY-ST-ZIP	HOLYWOOD FL:	33020		2. 4 CITY - 9						
TITLE	113507 71550 1 5 5		DELETE	3.1 TITLE	···			Change	Addition	
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREET	ADORESS				J	
CITY-ST-ZIP				3.4. City-S						
TITLE			DELETE	4.1 TITLE				Change	Addition	
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET	<b>ANDRES</b> S				ļ	
CITY-ST-ZIP				4.4 CITY-5						
TITLE			DELETE	5.1 TITLE	. 411			☐ Change	Addition	
NAME		,	<del></del>	5.2 NAME						
STREET ADDRESS				5.3 STREET	<b>V</b> DUBE CC	1				
CITY-ST-ZIP										
TITLE			DELETE	5.4 CITY - ST 6.1 TITLE	1-ZIP			Change	Addition	
NAME		'	OLLEIL					□ ∩ ranife	T Value	
				6.2 NAME	NDD0560					
STREET ADDRESS			ļ	6.3 STREET						
CITY-ST-ZIP				6.4 CITY - S1	- ZIP	i				

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.