

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

FILED
99 AUG 30 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000082093

1. Corporation Name
GUILLERMO VALENZUELA, M.D., P.A.
140 S.W. 84th Avenue Suite B
Plantation, FL 33324

Principal Place of Business Mailing Address
GUILLERMO VALENZUELA, M.D., P.A.
140 S.W. 84th Avenue Suite B
Plantation, FL 33324

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **9/26/96**

4. FEI Number **65-0698702** Applied For Not Applicable

21	2. Principal Place of Business	2a	Mailing Address
22	Suite, Apt #, etc.	26	Suite, Apt #, etc.
23	City & State	27	City & State
24	Zip	28	Zip
25	Country	29	Country
30		30	

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
GUILLERMO VALENZUELA, MD
140 S.W. 84 Ave. STE B
PLANTATION, FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

PRESIDENT DELETE

TITLE NAME **Guillermo J. Valenzuela**

STREET ADDRESS **140 S.W. 84th Ave**

CITY-ST-ZIP **Plantation, FL 33324**

TITLE NAME DELETE

TITLE NAME DELETE

TITLE NAME DELETE

TITLE NAME DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME **800002977 098**

2.3 STREET ADDRESS **-09/02/99--01069--006**

2.4 CITY-ST-ZIP ******150.00 ****150.00**

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ DATE: **4/30/99 (954) 486 2338**

SIGNATURE AND TYPED OR PRINTED NAME OF BANKING OFFICER OR DIRECTOR Date Daytime Phone # **426-2338**

CR2E034 (1/98)

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BERGMAN, SPIEWAK AND Company, P.A.
CERTIFIED PUBLIC ACCOUNTANTS
499 NW 70TH AVENUE, SUITE 116
PLANTATION, FLORIDA 33317-7573

GARRY S. BERGMAN, C.P.A.
MARC A. SPIEWAK, C.P.A.

PHONE: (954) 321-9991
FAX: (954) 321-9994

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: **Guillermo Valenzuela, M.D., P.A.**
P96000082093
Letter No. 999A00037603

Gentlemen:

In response to the above mentioned letter dated July 22, 1999, we are pleased to enclose a completed 1999 Corporation Annual Report and check No. 1121 for \$150 which was returned to Dr. Valenzuela because he had sent you an incompletd annual report.

Please do not hesitate to contact us if you need any additional information.

Respectfully,

BERGMAN, SPIEWAK and COMPANY, P.A.
CERTIFIED PUBLIC ACCOUNTANT



Maria I. Leon, C.P.A.
For the firm

August 4, 1999
Plantation, Florida

MEMBERS OF:
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS
CONNECTICUT SOCIETY OF CERTIFIED PUBLIC ACCOUNTANTS