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

	MENT # P960(RD B. WEISS, D.O., P.A.	0008409	8 (8)						
Principal Place of Business Mailing Address							- I I ROLLOOF FIN JOSER WINE SOUIT DOLLL DOLL ON FE	I BILLI BABAR BALAR I	OUTS SOLL SURF
7764 NORMA SUITE 24 JACKSONVIL		7764 NORMANDY BLVD SUITE 24 JACKSONVILLE FL 32271				DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified			
							10/09/1996		
2. Principal P	ace of Business	2a. Mailing Address					4. FEI Number	T A	pplied For
21		26					59-3403905	N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt.	. #, etc.				5. Certificate of Status Desired		Additional equired
City & State	9	City & Sta	te				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 24	Country 25	Zip 29		Countr 30	У		This corporation owes or has paid the c Personal Property Tax due June 30.		tangible No
9. Name and Address of Current Registered Agent							10. Name and Address of New Registere	d Agent	
SM	IITH, HULSEY & BUSEY	-		81	Nam	ne			
225 WATER STREET				82	Stre	et Addre	ss (P.O. Box Number is Not Acceptable)		
SUITE 1800					J				
JACKSONVILLE FL 32202				83	3				
				84	City		F	85 Zip	Code
	to the provisions of Sections 607,05 egistered agent, or both, in the Stat m familiar with, and accept the obli-	02 and 607.1508, File of Florida. Such ch gations of, Section 60	orida Statutes nange was au 07.0505, Flori	s, the abou thorized b ida Statute	e-name y the c s.	ed corpo orporatio	ration submits this statement for the purpose in's board of directors. I hereby accept the ap	of changing i pointment as	ts registered registered
SIGNATURE .	Signature, typed or printed name of registered ag	gent and title if applicable.	(NOTE:	Registered Ac	ent signal	ture required	when reinstaling) DATE		 [
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12
TITLE	P		DELETE	1.1 TITLE				Change	Addition
NAME	WEISS, HOWARRD B	III 04		1.2 NAME					1
STREET ADDRESS 7764 NORMANDY BLVD SUITE 2A				1.3 STREET ADDRESS		s			1
CITY-ST-ZIP	JACKSONVILLE FL		DELETE	1.4 CITY-	ST-ZIP			<u> </u>	
TITLE			DELETE	2.1 TITLE				Change	Addition
NAME				2.2 NAME		.			ţ
STREET ADDRESS				2.3 STREE 2. 4 CITY-		١ .			- 1
CITY-ST-ZIP TITLE			DELETE	3.1 TITLE	31-24			Change	Addition
NAME		_		3.2 NAME					
STREET ADDRESS				3.3 STREE	T ADDRES	s			
CITY-ST-ZIP				3.4. CITY-					
TITLE			DELETE	4.1 TITLE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREE	T ADDRES	s			
CITY-ST-ZIP				4.4 CITY-	ST-ZIP				_
TITLE			DELETE	5.1 TITLE				☐ Change	Addition
NAME				5.2 NAME					

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 697, Florida Statutes; and that my name appears in Block 13 if changed, or on an attayhment with an address.

6.1 TITLE 6.2 NAME 6.3 STREET ADORESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

DELETE

204) 781-7200

☐ Change

___ Addition

FILED

Feb 06 1998 8:00am

Secretary of State