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May 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000090154 (1)

1. Corporation Name

DIABETIC MANAGEMENT PROGRAM INC.

Principal Place of Business

23180 BOCA CLUB COLONY
BOCA RATON FL 33433

Mailing Address

23180 BOCA CLUB COLONY
BOCA RATON FL 33433-3936



3. Date Incorporated or Qualified

10/30/1996

3a. Date of Last Report

2. Principal Place of Business

21 7837 W Sample

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 124

Suite, Apt. #, etc.

27 City & State

City & State

23 Coral Springs FL

City & State

28 Zip

Zip

24 33065

Country

25 USA

Zip

29

Country

30

4. FEI Number

65-0706683

Applied For

Not Applicable

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

GERSNY, IRIS M
23180 BOCA CLUB COLONY
BOCA RATON FL 33433

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/1/97

12. OFFICERS AND DIRECTORS

TITLE ~~PDB~~ ☐ DELETE

NAME ~~GERSNY, IRIS M~~
STREET ADDRESS 23180 BOCA CLUB COLONY
CITY-ST-ZIP BOCA RATON FL 33433

TITLE ~~PB~~ ☐ DELETE

NAME Gersny, Robert
STREET ADDRESS 23180 BOCA CLUB COLONY
CITY-ST-ZIP BOCA RATON, FL 33433

TITLE ~~SD~~ ☐ DELETE

NAME PALADINE, SANDY
STREET ADDRESS 11224 NW 2ND COURT
CITY-ST-ZIP Coral Springs, FL 33071

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ~~VPB~~ ☒ Change ☐ Addition

1.2 NAME Gersny, IRIS M

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 do 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 resolver 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Gersny

DATE

4/1/97

Daytime Phone #

0316001

CR2E034 (9/96)