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May 06 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 # P96000096979 (5)

1. Corporation Name

KLIMAS MEDICAL GROUP, INC.



Principal Place of Business

9901 S.W. 47TH ST
SUITE 405
FT LAUDERDALE FL 33314

Mailing Address

3901 S.W. 47TH ST
SUITE 405
FT LAUDERDALE FL 33314-2815

3. Date Incorporated or Qualified

11/22/1996

3a. Date of Last Report

First Filing

2. Principal Place of Business

21 None

Suite, Apt. #, etc.

2a. Mailing Address

26 One Hook Road

Suite, Apt. #, etc.

4. FEI Number

65-0708487

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

24

Zip

Country

25

Zip

19079

Country

USA

9. Name and Address of Current Registered Agent

CARPENTER, KARON
2510 N.E. 47TH STREET
FT LAUDERDALE FL 33314

10. Name and Address of New Registered Agent

81 Name

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

83 3901 S.W. 47th Ave., #405

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

12. OFFICERS AND DIRECTORS

TITLE D
NAME MIRRA, RAYMOND A JR.
STREET ADDRESS 3901 S.W. 47TH ST
CITY-ST-ZIP FT LAUDERDALE FL 33314

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME Raymond A. Mirra, Jr.
1.3 STREET ADDRESS One Hook Road
1.4 CITY-ST-ZIP Sharon Hill, PA 19079

2.1 TITLE VP
2.2 NAME Kevin D. Stepanuk
2.3 STREET ADDRESS One Hook Road
2.4 CITY-ST-ZIP Sharon Hill, PA 19079

3.1 TITLE S
3.2 NAME John P. Mohnacs
3.3 STREET ADDRESS One Hook Road
3.4 CITY-ST-ZIP Sharon Hill, PA 19079

4.1 TITLE T
4.2 NAME Victor Battaglia
4.3 STREET ADDRESS One Hook Road
4.4 CITY-ST-ZIP Sharon Hill, PA 19079

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 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.

Kevin D. Stepanuk

4/23/97

610-586-8514

SIGNATURE:

KO Stepanuk VP

CR2E034 (9/96)