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**

DOCUMENT # P97000016827

1. Corporation Name

FLORIDA FAST COAST CANCER CENTER, INC.

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90151 015 ***150.00

LONIDA	LAST CONCT CANCELL CE	HILLIS BIO						
Principal Place	e of Business	Mailing Address			\dashv	S HORISON HAN LUNCH SOURT WORLD AGAIN 1881/1	COLOR CIDIO BILES INCE	
		4708 BANYON LANE						
TAMARAC FL 33319		TAMARAC FL 33319				DO NOT WRITE IN	THIS SPACE	
					<u> </u>	3. Date Incorporated or Qualifed		
						02/21/1997	<u>_</u>	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	Ap	plied For
21		26				65-0738133		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired	\$8.75 _. A	
22		27					Fee Re	
City & Stat	te · · · · ·	City & State		-		6. Election Campaign Financing	* \$5.00	
23		28	Count		-+	Trust Fund Contribution	Added to	o rees
Zip	Country	Zip	Count	у		This corporation owes the current ye Personal Property Tax.		⊠No
24	9. Name and Address of Current		30 J			10. Name and Address of New Registe		
	5. Maine plu Audiess of Culter	r 170Alathian URailt	8	1 Name				
FER	GUSON, JOHNATHAN A					CONTRACTOR NUMBER OF THE PARTY		
) S. FEDERAL HIGHWAY		8	2 Street	Address	s (P.O. Box Number is Not Acceptable)		
	E 200		8	3				
FT. F	PIERCE FL 34950-5194		<u> </u>				Jan 7: 6	<u> </u>
			8	4 City			FL 85 Zip C	code
				1				
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was aut	thorized b	v the como	corpora oration's	tion submits this statement for the purpo s board of directors. I hereby accept the	se of changing its appointment as re	registered gistered
office or r	registered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was autions of, Section 607.0505, Florid	thorized b da Statute	y the comp is.	oration's	s board of directors. I hereby accept the a	appointment as re	registered gistered
office or r agent. I a SIGNATURE	registered agent, or both, in the State or familiar with, and accept the obligate Signature, typed or printed name of registered agent	of Florida. Such change was autions of, Section 607.0505, Floridated the if applicable. (NOTE: F	thorized b da Statute Registered Ag	y the comp is.	oration's	nen reinstatting) OA	те	yistereu
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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.

6.4 CITY-ST-ZIP

SIGNATURE: