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

DOCUMENT # P97000024051 (9)

ROBERT C. CROPPER, DPM, P.A.

FILED Mar 17 1998 8:00am Secretary of State



					
Principal Place of Business Mailing Address					
1800 SECONE SARASOTA F) STREET #900 L 34236	1800 SECOND STREET SARASOTA FL 34236	#900		DO NOT WOITE IN THE ORLOS
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2. Principal Pi	2a, Mailing Address			03/11/1997 4, FEI Number 2/ Applied For	
— ·	BUS OF BUSINESS	<u></u> — 1			116 -072 011
Suite, Apt. #, etc.		Suite, Apt. #, etc.			€0.7E + 4.0011
22		27			5. Certificate of Status Desired \$8.75 Additional Fee Regulred
City & State		City & State			8. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip Country		Zip	 		8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren	t Registered Agent			10, Name and Address of New Registered Agent
WALLACH, JORDAN L				81 Name	
	0 SECOND STREET #900			62 Street Add	dress (P.O. Box Number is Not Acceptable)
	RASOTA FL 34236			0001.144	1000 (1.50. Box (Million 18 (Act / Occupiation))
•				83	
	1			84 City	85 Zip Code
					FL T
11. Pursuant to	to the provisions of Sections 607.0502 agistered agent, or both, in the State	2 and 607 .1508, Florida Stati of Florida. Such chan ge was	ites, the al	pove-named corp d by the corpora	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
agent. I ai	m familiar with, anti-accept the obliga	itions of, Section 607.0505, F	lorida Stat	utes.	
SIGNATURE	Signature Typed or printed name of registered ager	and title if applicable (NC	TF: Registerer	d Agent signature requi	ired when reinstating) DATE
12,	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TI	TLE	Change Addition
NAME	CROPPER, ROBERT M		1.2 NA	ME	
STREET ADDRESS	1800 SECOND STREET #900		1.3 \$1	REET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34238		1.4 CI	TY-ST-ZIP	
TITLE		DELETE	2.1 TI		Change Addition
NAME			22 NA	IME .	
STREET ADDRESS			2.3 \$1	REET ADDRESS	
CITY-\$1-ZIP			2. 4 C	ITY-ST-ZIP	
TITLE		☐ DEL E TE	3.1 TIT		Change Addition
NAME			3.2 NA	ME	
STREET ADDRESS			3.3 ST	REET ADDRESS	
CITY-ST-ZIP			3,4. CI	TY-ST-ZIP	
TITLE		☐ DELETE	4.1 T()	LE	Change Addition
NAME			4. 2 N	AME	:
STREET ADDRESS			4.3 ST	REET ADDRESS	
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP	
TITLE		DELETE	5.1 TIT	LE	Change Addition
NAME			5.2 NA	ME	
STREET ADDRESS			5.3 ST	REET ADDRESS	
CITY-ST-ZIP			5.4 CI	Y-ST-ZIP	
TITLE		DELETE	6.1 111	LE	Change Addition
NAME			6.2 NA	ME	
STREET ADDRESS			6.3 ST	REET ADDRESS	
CITY-ST-ZIP			6.4 CIT	Y-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 rollee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing, or or an algorithm with an address.

SIGNATURE:

- PAU DPM

1-21-98

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