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FILED
Apr 28 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000027359 (3)

1. Corporation Name

PROFESSIONAL MEDICAL EDUCATION, INC.



Principal Place of Business

Mailing Address

710 EXECUTIVE CENTER DRIVE #1-212
WEST PALM BEACH FL 33401

710 EXECUTIVE CENTER DRIVE #1-212
WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/18/1997

2. Principal Place of Business

2a. Mailing Address

21 2301 S. Congress Ave.
Suite, Apt. #, etc.

26 2301 S. Congress Ave.
Suite, Apt. #, etc.

4. FEI Number

65-0758282

Applied For
Not Applicable

22 322
City & State

27 322
City & State

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23 Bounton Beh, FL
Zip Country

28 Bounton Beh, FL
Zip Country

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24 33426

25 USA

29 33426

30 USA

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ATTAWAY, JOHN A JR
ONE LAKE MORTON DRIVE
LAKELAND FL 33801

81 Name

TED Young

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

2301 S. Congress Ave. # 322

83

84 City

Bounton Beh

FL

85 Zip Code

33426

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

TED Young

TED YOUNG, ADMINISTRATIVE DIRECTOR

4/8/98

Signature typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME D YOUNG, TED
STREET ADDRESS 710 EXECUTIVE CENTER DRIVE #1-212
CITY-ST-ZIP WEST PALM BEACH FL 33401

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME D YOUNG, TED
1.3 STREET ADDRESS 710 EXECUTIVE CENTER DRIVE #1-212
1.4 CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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 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

TED Young

CR2E034 (10/97)