## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000083763 (7)

DONNIE MASON-ZICKUS, R.N., M.A., P.A.

## **FILED** Mar 16 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				T CO DESCRIP AID TOTAL CORE DUTLE DOTAL DOTAL DOTAL START (NATED START FOR SER START FOR S	
		7130 SEMINOLE BLVD.					
7130 SEMINOLE BLVD. SEMINOLE FL 33772		SEMINOLE FL 33772				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 09/26/1997	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				59 - 3475175 Not Applicable	
Suite, Apt. #, etc		Suite, Apt #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cor	Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30	,		Personal Property Tax due June 30. X Yes No	
29	g. Name and Address of Curre		130	1	<del></del>	10. Name and Address of New Registered Agent	
				81	Name	IV. Italia dita redusa di itali riagiana rigori	
	SON-ZICKUS, DONNIE			"	TRAITIO		
	204 SUNSET BLVD.			82	Street Add	Idress (P.O. Box Number is Not Acceptable)	
RE	DDINGTON SHORES FL 33708						
				63			
				1			
				84	City	FL 85 Zip Code	
11 Pursuant	to the provisions of Sections 607 057	12 and 607 1508 Florida Statut	ns the a	have	-named co	· · · · · · · · · · · · · · · · · · ·	
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorize	d by	the corpora	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered	
agent la	m familiar with, ànd accept the oblig	ations of, Section 607.0505, FI	orida Sta	tutes			
SIGNATURE	<u> </u>						
	Signature typed or printed more of my stemated	en and the dappinable (NO) ID DIRLCTORS		d Ager	nt signature requ	DATE  ADDITIONAL CONTROL OF THE CONT	
12.	OFFICENSAN	DELETE	13,	171.5	<del></del> -	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition	
TITLE	U		1.1 )		ļ	Cualibe C' Adouton	
NAME	MASON-ZICKUS, DONNIE		1.2 N	IAME			
STREET ADDRESS	18204 SUNSET BLVD.		1.3 \$	TREET	ADDRESS		
CITY-ST-ZIP	REDDINGTON SHORES FL 3	3708	1.4 0	ITY-ST	- ZiP		
TITLE		☐ DELETE	2.1 TITLE			☐ Change ☐ Addition	
NAME			2.2 N	AME			
STREET ADORESS			235	TREEL A	ADORESS	•	
CITY-ST-ZIP				2 4 CHY+ST-ZIP			
TITLE	<del> </del>	DELETE			- 4"	Change Addition	
NAME			3.2 N				
					ABbarca		
STREET ADDRESS					ADDRESS		
CITY - ST - ZIP				CITY - ST	T-ZIP	TIA	
TITLE		☐ DELETE	4.1 T			☐ Change ☐ Addition	
NAME			4.21	IAME			
STREET ADDRESS			4.3 S	TREET A	ADDRESS		
CITY-ST-ZIP			4.4 0	ary-st	- ZIP	<u> </u>	
TITLE		☐ DELFTE	5.11	IILE		Change Addition	
NAME			5.2 N	AME	-		
STREET ADDRESS					ADDRESS		
				ITY-ST	Į.		
CITY-ST-ZIP TITLE		DELETE	5.4 C		- LIF	Change Addition	
1		F Direct				Change 1 Addition	
NAME			62 N				
STREET ADDRESS			635	TREET A	ADDRESS		
CITY-ST-ZIP			6.40	ITY-ST	i-ZIP		

14. Thereby 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 eath; 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: