SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

BOCA RATON FL 33428

SUITE 214

9900 CENTRAL PARK BLVD NORTH

PROFIT **CÓRPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000098948 (7) Corporation Name

KEVIN MONAHAN, M.D., P.A.

Principal Place of Business

BOCA RATON FL 33428

SUITE 214

CITY-ST-ZIP TITLE

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

NAME

TITLE

NAME

TITLE

NAME

9980 CENTRAL PARK BLVD NORTH

3. Date Incorporated or Qualified 11/20/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65 NGO 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Zip Country 24 Personal Property Tax due June 30. 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 **AMERILAWYER** 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 84 Zip Code City 85 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE 1.1 TITLE Change L_∫ DELETE MONAHAN, KEVIN 1.2 NAME NAME 9980 CENTRAL PARK BLVD N, STE 214 STREET ADDRESS 1,3 STREET ADDRESS **BOCA RATON FL 33428** 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 2.1 TITLE Addition M**on**ahan. Kevin 2.2 NAME NAME 9980 CENTRAL PARK BLVD N, STE 214 2.3 STREET ADDRESS STREET ADDRESS **BOÇA RATON FL 33428** 2.4 CITY-ST-ZIP CITY-ST-ZIP 3.1 TITLE TITLE T] DELETE Change ___ Addition 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS

3.4 CITY-ST-ZIP

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

4.1 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

DELETE

FILED Jul 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Change

Change

Change

Addition

___ Addition

Addition

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, on an attachment with an address. nalox