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May 06, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000007693

1. Corporation Name
SUBHANI AND BERNDT IPA, INC.



Principal Place of Business % MARC H AUERBACH, ESQ. 100 S.E. 2ND STREET 28TH FLOOR MIAMI FL 33131-	Mailing Address % MARC H AUERBACH, ESQ. 100 S.E. 2ND STREET 28TH FLOOR MIAMI FL 33131-
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 201 S. Biscayne Blvd. Suite, Apt. #, etc. 22 Suite # 2000 City & State 23 Miami, Florida Zip Country 24 33131 25 US	26 201 S. Biscayne Blvd. Suite, Apt. #, etc. 27 Suite # 2000 City & State 28 Miami, Florida Zip Country 29 33131 30 US

3. Date Incorporated or Qualified 01/23/1998	4. FEI Number 05-0829291	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

AUERBACH, MARC H G
 100 S.E. 2ND STREET
 28TH FLOOR
 MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	201 S. Biscayne Blvd.
83 #	# 2000
84 City	Miami
85 Zip Code	FL 33131

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 *Marc Auerbach* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	David L. Berndt D.O.	
1.3 STREET ADDRESS	5930 S.W. 64th Avenue	
1.4 CITY-ST-ZIP	Davie, FL 33314	
2.1 TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Zakia Subhani, M.D.	
2.3 STREET ADDRESS	10051 Pines Blvd., Suite A	
2.4 CITY-ST-ZIP	Pembroke Pines, FL 33025	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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, with all other like empowered.

SIGNATURE: *[Signature]* 4-29-99 791-7101
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/1/98)