PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

May 14, 1999 8:00 am Secretary of State

05-14-1999 90009 050 ***300.00

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000010333

1. Corporation Name

CITY-ST-ZIP

SIGNATURE:

14. I hereby certify that the information supplied with this filling does not qualify for indicated on this annual report or supplemental annual report is true and acceleration or director of the corporation or the receiver of trusted empowered by Block 12 or Block 13 if changed, or on an attacificant pitty art address. (b) he all the properties of the properties of

CARDIOVASCULAR CONSULTANTS OF TAMPA BAY, P.A.

Principal Place	e of Business	Mailing Address					# 8014 ##187 1184 * 4 #1	88 (19 42)	***************************************
201 N. FRANKL	LIN STREET	201 N. FRANKLIN STREET							
SUITE 2600		SUITE 2600						_	
TAMPA FL TAMPA FL				:		DO NOT WRITE	IN THIS SPAC	<u> </u>	
						3. Date Incorporated or Qualified 01/30/1998			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			lled For
21 2727 W	W. Martin Luther Kin	g 26 2727 W. Marti	in Lutl	her	<u>King</u>	650814258	2		Applicable
Suite, Apt.	#, etc. BLV			•	Blvd.	5. Certificate of Status Desired	-		ditional
22 Suite		27 Suite 800						ee Rec	
City & Stat		City & State	 ,			6. Election Campaign Financing			May.Be
23 Tampa,		28 Tampa, FL				Trust Fund Contribution		dded to	Fees
Zlp	Country	Zip	Country	,		a. This corporation owes the current	t year Intangible Ye⊡Ye		□No
24 33607	25 Hillsborou	21421	30 Hill	SDO	cougn	Personal Property Tax.			
	g, Name and Address of Curren	t Registered Agent	-	Man		10. Name and Address of New Res	Signatured Wilelus		
אותם	G. RICARDO A		81	Nan	113				
	n. Franklin Street		82	Stre	et Addres	ss (P.O. Box Number is Not Acceptable	e)		
	n. Franklin Street TE 2600		<u> </u>						
			83	1					
I IAM	IPA FL		84	City		······································	85	Zip C	ode
]		ration submits this statement for the pu	FL		
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the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ate and that my signature shall have the same legal effect as if made under oath; that it am an ecute this report as required by Chapter 607. Florida Statutes; and that my name appears in