



State of Florida
Office of State Treasurer
Tallahassee, Florida

FOR OFFICIAL USE	
DATE	NUMBER
12/08/1999	01851

DEBIT MEMORANDUM

P 98 0000 210 642

To: DEPT. OF STATE

General Revenue Total	0.00
Trust Total	2,078.75
Other Total	0.00
Total	\$2,078.75

700003151857--7

Distribution

Cross Ref	Samas Code	Reason	Amount
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	30.00
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	75.00
012	45-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS	165.00
012	45-20-2-130001-45300000-00-000100-00	OTHER	758.75
012	45-20-2-130001-45300000-00-000100-00	ACCOUNT CLOSED	1,050.00

Grand Total: \$2,078.75

01851-D

RECEIVED
 99 DEC 10 PM 1:55
 BUREAU OF
 ACCOUNTING, BUDGET AND
 GENERAL SERVICES

The above named fund(s) has been reduced by the amount of this check(s) under the authority of Section 215.34, F.S.

Bill Nelson

Process Date: 11/30/1999

State Treasurer

ARMANDO ANGULO
MAGALY ANGULO
13820 NW 199th St
Hialeah, FL 33015

DATE 11-08-95

63-6431670
BRANCH 03044

D 0331

PAY TO THE
ORDER OF

Secretary of STATE
James Hank **REFER TO MAKER**

\$ 758.75

DOLLARS

FIRST

First Union National Bank
R/F 067006432

REINSTATEMENT

FOR ARMANDO ANGULO MD, PA

Armando Angulo

⑆067006432⑆1010012126026⑆ 0331 ⑆0000075875⑆

4480JDD 1098

2205 28998

DEPT OF STATE 4500453

FOR DEPOSIT ONLY

-11/23/99--010/99--0540

1005068796

NOV 24 99

NOV 24 1999 10 11 0839

NOV 24 1999 10 11 0839

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NOV 24 1999 10 11 0839



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

January 19, 2000

Armando Angulo MD PA
4999 W. 8th Ave.
Suite 26
Hialeah, FL 33012

SUBJECT: ARMANDO ANGULO MD PA
Ref. Number: P98000021064

Debit Memo #: 01851-D

This is to inform you that your check #0331 dated November 8, 1999 in the amount of \$758.75 and submitted for ARMANDO ANGULO MD PA has been returned to us by your bank because of Refer to Maker.

We request that you remit a cashier's check or money order in amount of \$796.69 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Melinda Lilliston
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call
(850) 487-6900.

Sincerely,
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 499A00059458

cc:Armando Angulo
3820 NW 199th St.
Hialeah, Fl. 33015



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

February 29, 2000

Armando Angulo MD P.A.
4999 W. 8th Ave.
Suite 26
Hialeah, FL 33012

SUBJECT: ARMANDO ANGULO MD PA
Ref. Number: P98000021064

Debit Memo #: 01851-D

Due to your failure to respond to our previous letter advising you of the returned check #0331, the Reinstatement for ARMANDO ANGULO MD PA has been cancelled and is considered not filed as of February 29, 2000.

The status of your corporation has now reverted to its previous status of administratively dissolved or revoked.

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely
Melinda Lilliston
Administrative Assistant II
Division of Corporations

Letter number: 600A00011012