PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000067268 1. Corporation Name

STREET ADDRESS

GENEROSO P. MASANGKAY, M.D., P.A.

									BURN MILHER	
Principal Place	e of Business	Mailing Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••			
316 SOUTH BA	ylen suite 560	316 SOUTH BAYLEN SUIT	E 560							
PENSACOLA FL		PENSACOLA FL 32501			DO NOT WRITE IN THIS SPACE					
						Date Incorporated or Qualifed	E 114 17110 01	AUL		1
						07/29/1998				
3 Dissipal D	tace of Business	2a. Mailing Address				4. FEI Number		Ar	plied For	1
	IBCS OF BUSINESS	26				59-0737872		No	of Applicable	
Suite, Apl.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		.	Additional equired	
22		27 City & State -	 -			6. Election Campaign Financing		\$5.00	May Be	1
City & Stat	g	28				Trust Fund Contribution		Added	to Fees	1
Zip	Country	Zip		ıntry		This corporation owes the curre	nt year inlang	gible		
24	25	29	30			Personal Property Tax.		Yes	□No	ł
	9. Name and Address of Current	Registered Agent		Ļ ,		10. Name and Address of New R	egistered Ag	елт		┨
				81	Name					
	LE, THEODORE W			82	Street Addres	ss (P.O. Box Number is Not Accepta	ole)			1
316	South Baylen Suite 560						<u> </u>			1
PEN:	SACOLA FL 32501			83						
	•			84	City		FL	85 Zip	Code	
<u></u>	to the provisions of Sections 607.0502	and 607 1509 Elected State	les the		named como	ration submits this statement for the	wenness of ch	anging its	registered	1
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligation	Florida. Such change was a	uthorize	d by t	he corporation	n's board of directors. I hereby accept	the appointn	nent as re	gistered	1
agent. I a	im familiar with, and accept the obligation	ons of Section 697.0505, Fit	orida Sta	tutes.			-1.100	•		Į
SIGNATURE	I headou W	. Jame			algneture required	- Marine	5/11/47			10
47	Signature, typed or printed name of registered agent OFFICERS AND		13.	Agent	agration recommend	ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	ORS IN 12] 8
12.	D OFFICERS AND	DELETE	117	mue				Change	Addition	(11/08
mre		<u></u>		AME.	1					
NAME	MASANGKAY, GENEROSO P	•			ADDRESS					100
STREET ADDRESS	4400 BAYOU BLVD. SUITE 26B				1] [
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NAME			221			•				
STREET ADDRESS					ADDRESS					
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STREET ADDRESS			4.35	TREET	ADDRESS					
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TITLE		☐ DELETE	5.1 T	TILE] Change	Addition	
NAME	1		5.2 N	ME	1					1
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STREET ADDRESS			5.3.5	TREET	ADDRESS					
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STREET ADDRESS CITY-ST-ZIP		☐ DELETE	1	TY-ST				_ Change	Addition	
CITY-ST-ZIP		OELETE	5.4 C	TY-ST				Change	Addition	

8.4 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 suppliemental 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 attachingent with an address, with all other like empowered.

FILED May 10, 1999 8:00 am

Secretar 05-10-1999 90	y	of	Stat	
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Box Number is Not Acceptable)				
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