2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9900027954 1. Entity Name KERI M. POMELLA, O.D., P.A. Principal Place of Business Mailing Address 3552 MAGELLAN CR 3552 MAGELLAN CR APT #124 APT #124 MIAMI FL 33180 MIAMI FL 33180 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc City & State City & State Zip Country Zip Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title it applicable

OFFICERS AND DIRECTORS

POMELLA, KERI M

APT 124 MIAMI FL 33180

(See criteria on back)

11.

TITLE

NAME

TITLE

TITLE

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NAME

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NAME

STREET ADDRESS

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CITY-ST-Z:P

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CITY-ST-ZiP

3552 MAGELLAN CIR

9. This corporation is eligible to satisfy its Intangible

POMELLA, KERI M OD

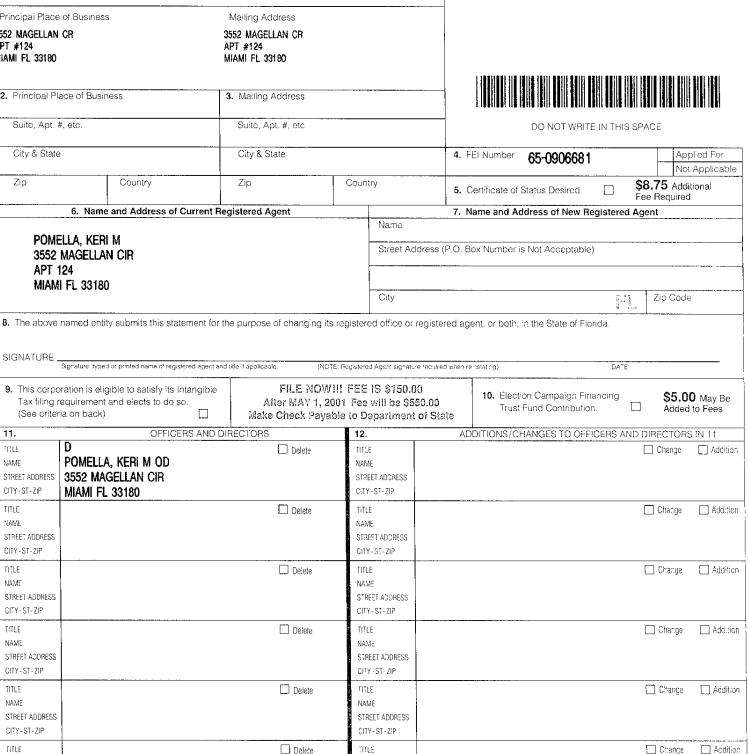
3552 MAGELLAN CIR

MIAMI FL 33180

Tax filing requirement and elects to do so.

FILED Apr 27, 2001 8:00 am Secretary of State

4-27-2001 90407 012 ***150.00



13. Thereby 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with a

Name

City

FILE NOW!!! FEE IS \$150.00

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12.

TITLE

NAME

TITLE

NAME

TITLE

NAMS

TITLE

NAME

TITLE

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TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ACCRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZiP

CITY-ST-ZIP

CITY - ST- ZIF

CITY-ST-ZIP

CITY-ST-ZIP

City-st-zip

☐ Addition