FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 02 1996 8:00 am
Secretary of State

DOCUMENT # S 63099

1. Corporation Name
CORAL WAY MEDICAL ASSOCIATES

Principal Place of Business / Mailing Address
1300 CORAL WAY, SUITE 202
MIAMI, FLORIDA 33145

3. Date Incorporated or Qualified: 6/28/91
3a. Date of Last Report: 5/1/95

2. Principal Place of Business	2a. Mailing Address
21 1300 CORAL WAY	26 SAME
Suite, Apt. #, etc. 22 SUITE 202	Suite, Apt. #, etc. 27
City & State 23 MIAMI, FLORIDA	City & State 28
Zip 24 33145 Country 25 USA	Zip 29 Country 30

4. FEI Number: 65-0275854 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ✓ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
MARVIN MICHAELS, ESQUIRE
1010 S.W. 86 COURT
MIAMI, FLA 33144

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 ______ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DIRECTOR ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	LAPLUME, MARIO O. M.D.	1.2 NAME	
STREET ADDRESS	1300 CORAL WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FLA 33145	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	000001847700 -06/03/96--01032--013 ***702.00
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

a 6.2.96

14. I do hereby certify that the information supplied with this filing is voluntary and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] MARIO O. LAPLUME 5/28/96 (305) 858-0562
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

S63099

2-2

4/16/96 CORPORATE DETAIL RECORD SCREEN 2:08 PM

NUM: S63099 01:FL ACTIVE/FL PROFIT FLD: 06/28/1991
FEI#: 65-0275054
NAME : CORAL WAY MEDICAL ASSOCIATES, INC.
PRINCIPAL: 1300 CORAL WAY
ADDRESS MIAMI, FL 33145
RA NAME : MICHAELS, MARVIN D.
RA ADDR : 1010 S.W. 66TH COURT
MIAMI, FL 33144
ANN REP : (1993) BY 03/22/93 (1994) BY 04/08/94 (1995) BY 05/01/95

4/16/96 OFFICER/DIRECTOR DETAIL SCREEN 2:08 PM

CORP NUMBER: S63099 CORP NAME: CORAL WAY MEDICAL ASSOCIATES, INC.
TITLE: D NAME: LAPLUME, MARIO O., M.D.
1300 CORAL WAY
MIAMI, FL