## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE :

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Apr 27 1998 8:00am
Secretary of State

**FILED** 

	1998	DIVISION OF COR	PORATIONS ,	Scoretary	of State
	MENT # <b>S797</b> ( In <b>ROTHMAN</b> , D.P.M., P.A.	98 (2)			
****					
Principal Plac	e of Business	Mailing Address		-	EN QUAN BURN BURN TRAK 1881
2754 A ENTERPRISE RD. 2754 A ENTERPRISE RD.					
ORANGE CIT	Y FL 32763	ORANGE CITY FL 32763		DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualified	
		~		09/12/1991	
	Place of Business	2a. Mailing Address 26	•	4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		59-3093941	Not Applicable  \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	.0	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	<b>28</b>	Country	Trust Fund Contribution	Added to Fees
24]	25	29 30	Cooning	<ol><li>This corporation owes or has paid the of Personal Property Tax due June 30.</li></ol>	urrent year Intangible
	9. Name and Address of Curr		<u> </u>	10. Name and Address of New Registere	
RC	OTHMAN, CYNTHIA A.		81 Name		
	O COACH LAMP CT		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
SA	NFORD FL 32771		83	· · · · · · · · · · · · · · · · · · ·	
			00		
			84 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607 0	502 and 607.1508, Florida Statutes, t	he above-named corp	oration submits this statement for the nurpose	of changing its registered
office or r agent. I a	r <b>egist</b> ered agent, or both, in the Sta im <b>fa</b> miliar with, and accept the obl	ite of Florida. Such change was auth- ligations of, Section 607.0505, Florida	orized by the corporati a Statutes.	on's board of directors. I hereby accept the ap	ppointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered a  OFFICERS A	agent and life if applicable (NOTE: Rei NDD DIRECTORS	gistered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PST	DELETE	1.1 TITLE	ADDITIONAL AND	Change Addition
NAME	ROTHMAN, ROY A	j	1.2 NAME		];
STREET ADDRESS	840 COACH LAMP COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	SANFORD FL	DELETE	1.4 CITY-ST-ZIP		——————————————————————————————————————
TITLE Name	VD   Rothman, Roy A	☐ DELETE	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS	840 COACH LAMP COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP	SANFORD FL	ľ	2. 4 CITY-ST-ZIP		1
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
Name		Į	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - \$1 - ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		CT change CT Mobilion
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - S1 - ZIP		
TITLE			5.1 TITLE		Change Addition
NAME STREET ASSESSES	,		5.2 NAME		
STREET ADDRESS City-St-Zip			5.3 STREET ADDRESS		
TITLE	<u> </u>	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	i.	_	6.3 STREET ADDRESS		
CITY-ST-ZIP	and the stand the later with the standard		6.4 CITY-ST-ZIP	C	37 0 4 1 2 3
III. I METEDY C	Jeruiy trial the information supplied	with this tillnot goes not quality for the	e exemplion stated in l	Section 119.07(3)(i), Florida Statutes, I further of	certity that the information.

Indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatio indicated on this annual report or supplied minutal 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 to on an attachment with an address.

GNATURE