

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

FILED

**May 06 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # V68473 (0)

1. Corporation Name
JORGE L. ORBAY-CERRATO, M.D., P.A.



Principal Place of Business: **4649 PONCE DE LEON BLVD STE #402 CORAL GABLES FL 33146 US**

Mailing Address: **4649 PONCE DE LEON BLVD STE #402 CORAL GABLES FL 33131**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 8905 SW 87th Ave	26 8905 SW 87th Ave
22 Ste 100	27 Ste 100
23 Miami, FL	28 Miami, FL
24 33176 25 USA	29 33176 30 USA

3. Date Incorporated or Qualified: **10/05/1992**

4. FEI Number: **65-0367050**

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

~~MURAI WALD BIONDO & MORENO PA~~
~~25 SE 2ND AVE~~
~~000 INGRAHAM BLDG~~
~~MIAMI FL 33131~~

10. Name and Address of New Registered Agent

81 Name: **AMKGS Registered Agents Inc.**

82 Street Address (P.O. Box Number is Not Acceptable): **One S.E. 3rd Avenue, Suite 1980**

84 City: **Miami** 85 Zip Code: **33131**

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: *[Signature]* **4/28/98.**
Signature type for printed name to be entered in printed field (not applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	President	<input type="checkbox"/> DELETE
NAME	ORBAY-CERRATO, JORGE L	
STREET ADDRESS	4649 PONCE DE LEON BLVD	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	x Vice-Pres / Treasurer	<input type="checkbox"/> DELETE
NAME	Badia, Alejandro	
STREET ADDRESS	520 Brickell Key Dr. Apt. 1010	
CITY-ST-ZIP	Miami, FL 33131	
TITLE	Vice-Pres / Secretary	<input type="checkbox"/> DELETE
NAME	Khouri, Reger	
STREET ADDRESS	478 Bay Ln.	
CITY-ST-ZIP	Key Biscayne, FL 33149	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	800002518008
5.3 STREET ADDRESS	-05/11/98--01015--012
5.4 CITY-ST-ZIP	***150.00
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 supplemental 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 attachment with an address.

[Signature]

4/20/98

CR2E034 (10/97)