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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 638270

(9)

Principal Place of Business Mailing Address 6759 FIRST AVENUE SOUTH Mailing Address									
ST. PETERSE	BURG FL 33707	ST. PETERSBU	JRG FL 3370	7-1307					
						3. Date Incorporated or Qualified 10/02/1979	1	Pate of Last Ri /26/1996	eport
2. Principa: Place of Business		2a. Mailing Address			4. FEI Number	1 01/		oplied For	
21		26				59-1941958			ot Applicable
Suite, Apt # etc		h	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State			City & State			6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added t	
Zip	Country	Zip			itry	 This corporation has liability for Florida Statutes 	_	e tax under s. No	. 199.032,
24	25 9. Name and Address of Cur	29 rent Registered Age	nt	30		10. Name and Address of New R			
ΔP	PPLE, PHILLIP B., D.D.S.		·		31 Name				***************************************
	59 FIRST AVENUE SOUTH			-	32 Street Ad	Idress (P.O. Box Number is Not Accepta	ible)		
ST	PETERSBURG FL 33707			L					
				[1	93				
				ļī	34 City		FL	85 Zip (Code
11. Porsum	at to the provisions of Sections 607.0	1502 and 607 1508 E	lorida Statut	os the ab	ove-named co	orporation submits this statement for the		of changing it	s registered
office o agent 1	or registered agent, or both, in the St. I am familiar with, and accept the ob	ate of Florida. Such c algations of, Section (hange was a 307.0505, Fa	authorized orida Statu	by the corpor tes.	ration's board of directors. I hereby acce	pt the ap	pointment as	registered
SIGNATURI	E		A.A					***	
12.	Signative, typed or printed name of registered OFFICERS	AND DIRECTORS	(NOT	E Registered	Agent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AN	D DIRECTOR	3S IN 12
TITLE	DP CT TOLLING 7		DELETE	1,1 101	E	7.001110110,010111020110 011		Change	Addition
NAME	APPLE, PHILLIP B.,D.D.S.	_		1.2 NA)				•	,,,,,
STREET ADDRES	ATTA PIRAT ILELLIE CALE	1		1.3 STF	EET ADDRESS				
DITY-ST-ZIP	ST. PETERSBURG FL			1.4 CfT	Y-ST-ZIP				
THTLE			DELFTE	2.1 1111	Ē			Change	Addition
NAVé				2.2 NAM	AE				
STREET ADDRES	s {			2.3 STA	EET ADDRESS				
CITY - ST - ZIP			1 55: 575		Y-ST-ZIP				
TITLE		L	J DELETE	3.1 1171				Change	Addition
NAM:				3.2 NAI	· ·				
STREET ADDRES	⁵⁵				EET ADDRESS				
CITY - ST - ZIP TITLE			DELETE	3.4 CII 4.1 TITI	Y-ST-ZIP			Change	Addition
NAME		head	Jocech	4. 2 NA				C Ottoingo	L.J riodipon
STREET ADDRES	26				EET ADORESS				
CITY - ST - ZiP					Y-ST-ZIP				
THEF			DELETE	5.1 TITI	·····	· · · · · · · · · · · · · · · · · · ·	**********	Change	Addition
NAME				5 2 NAI	ME]				
STREET ACIDRES	35			5 3 STF	EET ADDRESS				
City-St-7P				54 CIT	Y-ST-ZIP				
Title			DELETE	61 TIT		7,000		Change	Addition
NAME				6.2 NAI	AE .				
STREET AUDRES	58			6 3 STF	IEET ADDRESS				
	İ								

14. I do 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 and cated 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:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

P. B. Apple 2/14/9> 8/3.

FILED

Feb 28 1997 8:00am

Secretary of State