FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 PM 12:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M25784** **(3)**

1. Corporate Name
DR. VINCENT A. BILELLO, P.A.

Principal Place of Business
C/O DR. VINCENT A. BILELLO
3766 NE 3RD AVE.
POMPANO BCH FL 33064

Mailing Address
C/O DR. VINCENT A. BILELLO
3766 NE 3RD AVE.
POMPANO BCH FL 33064

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/14/1986**
3a. Date of Last Report: **04/14/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City, State — 23
City, State — 28
24 25 29 30

4. FEI Number: **59-2621724** — 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. The corporate indemnity for adoption tax under s. 196.1995, Florida Statutes: [X] Yes [ ] No

9. Name and Address of Current Registered Agent
BILELLO, VINCENT A., DR.
3766 NE 3RD AVE.
POMPANO BCH FL 33064

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. [illegible]

12. OFFICER AND DIRECTOR DATA

Title	Name	Street Address	City, State, Zip
DP	BILELLO, VINCENT A., DR.	3766 NE 3RD AVE.	POMPANO BCH FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS DATA

Title	Name	Street Address	City, State, Zip	Change / Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition
				[ ] Change [ ] Addition

14. I hereby certify that the information supplied with this report is accurately furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. Further I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that the 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 (changed or added) or is attached with an address.

SIGNATURE: A. Bilello DC
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date (mm/dd/yyyy)

0107424 CP