

**FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90156 024 ***150.00

DOCUMENT # P95000036568 ✓
1. Entity Name
Rich-Art Dental Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6531 Sunset Strip

3. Mailing Address
6531 Sunset strip

Suite, Apt. #, etc.
Suite # 6

Suite, Apt. #, etc.
SUIT #6

City & State
Sunrise FL

City & State
Sunrise FL

Zip
33313

Country
U.S.A.

Zip
33313

Country
USA

4. FEI Number
65-0581954

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Richard Giambrone

Street Address (P.O. Box Number is Not Acceptable)

6531 Sunset Strip

City Sunrise

FL

Zip Code
33313

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PD. Richard Giambrone 6531 Sunset Strip Sunrise FL 33313</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

13. 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Giambrone Date April 26, 02 Daytime Phone # 954 572-4210

CR2E034B (12/01)