

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 08 1998 8:00am  
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000072139 (3)

1. Corporation Name  
 SHARON T. RING, P.A.

Principal Place of Business  
 927 SW 35TH CT  
 BOYNTON BEACH FL 33425

Mailing Address  
 927 SW 35TH CT  
 BOYNTON BEACH FL 33425



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/18/1997
4. FEI Number:  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. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30:  Yes /  No
10. Name and Address of New Registered Agent

2. Principal Place of Business

2a. Mailing Address

21 | State, Apt. #, etc.  
 27 | City & State  
 23 | Zip | County  
 24 |

26 | State, Apt. #, etc.  
 27 | City & State  
 28 | Zip | County  
 29 |

9. Name and Address of Current Registered Agent

RING, SHARON T  
 927 SW 35TH CT  
 BOYNTON BEACH FL 33425

81 | Name  
 82 | Street Address (P.O. Box Number is Not Acceptable)  
 83 |  
 84 | City  
 FL | 85 | Zip Code

11. Pursuant to the provisions of sections 607.050(2) and 607.350(5), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent or registered agent, 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 understand with and accept the obligations of section 607.050(5), Florida Statutes.

SIGNATURE

(A) (i) Registered Agent (see section 607.050(2), Florida Statutes)

(B) (ii) Registered Agent (see section 607.350(5), Florida Statutes)

(C) (iii)

12	OFFICERS AND DIRECTORS	
1101	DPST	<input type="checkbox"/> DELETED
1102	RING, SHARON T	
1103	927 SW 35TH CT	
1104	BOYNTON BEACH FL 33425	
1105		<input type="checkbox"/> DELETED
1106		
1107		<input type="checkbox"/> DELETED
1108		
1109		<input type="checkbox"/> DELETED
1110		
1111		<input type="checkbox"/> DELETED
1112		
1113		<input type="checkbox"/> DELETED
1114		
1115		<input type="checkbox"/> DELETED
1116		
1117		<input type="checkbox"/> DELETED
1118		
1119		<input type="checkbox"/> DELETED
1120		

13	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1301		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1302		
1303	ASSOCIATE ADDRESS	
1304	CITY/STATE/ZIP	
1305	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1306	NAME	
1307	ASSOCIATE ADDRESS	
1308	CITY/STATE/ZIP	
1309	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1310	NAME	
1311	ASSOCIATE ADDRESS	
1312	CITY/STATE/ZIP	
1313	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1314	NAME	
1315	ASSOCIATE ADDRESS	
1316	CITY/STATE/ZIP	
1317	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1318	NAME	
1319	ASSOCIATE ADDRESS	
1320	CITY/STATE/ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(c), Florida Statutes. I further certify that the information is not filed on the annual report or supplemental annual report by 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 Part 12 or 13 of Block 13 if changed, or on any attachments with an address.

SIGNATURE: Sharon T. Ring SHARON T. RING 9/15/98 (561) 738-0892

01/08/98

CR20024 (5/98)