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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P97000089349 (9)

DR. MUHAMMAD R. ALI, B.D.S., PA.

	OTHER THE PLANTS	, n		THE PROPERTY HE SHALL REAL PROPERTY FROM FROM THE PROPERTY FROM THE PROPERTY FROM THE PROPERTY OF THE PROPERTY FROM THE
Principal Plac	e of Business	Mailing Address		c samirādi eta sauce cades dansi annis daini navas eleva idend vivis acad bas elek-
1221 S. WICKHAM RD		1221 S. WICKHAM R	D .	
WEST MELB	OURNE FL 32904	WEST MELBOURNE	FL 32904	DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				09/23/1997
2. Principal P	lace of Business	2a, Mailing Address	·	4. FEI Number Applied For
21		26		59-347 8202 Not Applicable
Suite, Apt.	#, etc.	Suite. Apt. #, etc.		SR 75 Additional
22		27		5. Certificate of Status Desired Fee Regulred
City & Stat	е	City & State		6. Election Campaign Financing \$5.00 May Be
23		28	. , ,	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curre	nt Basistered Agent	30	Personal Property Tax due June 30, Pres No  10, Name and Address of New Registered Agent
	<del></del>	in Maßisterag Wäglif	81 Name	
	ANTORE, MICHAEL A		ÞŔ.	MUHAMMAD R. ALI
1221 S. WICKHAM RD WEST MELBOURNE FL 32904		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	EST MELDOURNE FL 32904		83	1
			100	9 MARIPOSA DR
			84 City PA	LM BAY, FL. FL 85 32905
11. Pursuant	to the provisions of Sections 607 050	02 and 607.1508. Florida Sta		rporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change wa	as authorized by the corpora	ation's board of directors. I hereby accept the appointment as registered
1	Mulammac R. Hi.		, i lonka Sialoles.	4-30-98
SIGNATURE	Signature, typed or printed name of registered ag-	e of and five if applicable (	NOTE Registered Agent signature requ	uired when reinstating) DATE
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	( O	DELETE	1.1 TITLE	P, VP, T, S M Change Addition
NAME	ALI, MUHAMMAD R		1.2 NAME	
STREET ADDRESS	1221 S. WICKHAM RD		1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST MELBOURNE FL 3290		1.4 CITY - ST - ZIP	
TITLE		☐ DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		DETETE	2. 4 CITY-S1-ZIP	D Oberes C Augus
TITLE		L Dutt	31 TITLE	Change Addition
NAME	i		3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	Change Addition
NAME		bkttc	4.2 NAME	Cisalife
STREET ADDRESS			4.3 STREET ADDRESS	
			<b>3</b>	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		<del></del>	6.2 NAME	
STREET ADDRESS			6.2 CYRELT ADDRESS	

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 suppliemental 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 of 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.

Michania & M. O.C.

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**FILED** 

May 06 1998 8:00am

Secretary of State