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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 # F65736 (3)
Corporation Name

FREDERICK E. KNOLL, D.D.S., P.A.

Principal Place of Business

Mailing Address

c/o FREDERICK E. KNOLL DDS
951 NE 167th ST. #208
N MIAMI BEACH FL 33162

c/o FREDERICK
E. KNOLL DDS
951 NE 167th ST.
N. MIAMI BEACH FL
33162

3. Date Incorporated or Qualified

02/03/1982

3a. Date of Last Report

4. FEI Number

59-2159928

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 has liability for intangible tax under s. 190.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

1. Suite, Apt. #, etc.

2b. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

4. 25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KNOLL, FREDERICK E., DDS
951 NE 167th St. #208
N MIAMI BEACH FL 33162

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 607.0502 and 607.1408, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered
office or registered agent, or 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME ☐ DELETE

14. TITLE

☐ Change ☐ Addition

NAME KNOLL, FREDERICK E.

15. NAME

STREET ADDRESS 951 NE 167th ST.

16. STREET ADDRESS

CITY, ST, ZIP N MIAMI BEACH FL 33162

17. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE NAME ☐ DELETE

18. TITLE

☐ Change ☐ Addition

NAME ANNE KNOLL

19. NAME

STREET ADDRESS 451 NE 167th

20. STREET ADDRESS

CITY, ST, ZIP N. Miami Beach FL 33162

21. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE NAME ☐ DELETE

22. TITLE

☐ Change ☐ Addition

NAME

23. NAME

STREET ADDRESS

24. STREET ADDRESS

CITY, ST, ZIP

25. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE NAME ☐ DELETE

26. TITLE

☐ Change ☐ Addition

NAME

27. NAME

STREET ADDRESS

28. STREET ADDRESS

CITY, ST, ZIP

29. CITY, ST, ZIP

988882151250

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