SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED Sep 08 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 **DOCUMENT # G96420** TORNWALL, D.D.S. AND WEERASOORIYA, D.M.D., P.A. Principal Place of Business Mailing Address 1861 PLACIDA ROAD 1861 PLACIDA ROAD **SUITE 106** SUITE 106 DO NOT WRITE IN THIS SPACE ENGLEWOOD FL 34224 ENGLEWOOD FL 34224 3a. Date of Last Report 3. Date Incorporated or Qualified <u>04/17/1984</u> <u>11/15/1996</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2399967 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible X Yes [i] No Personal Property Tax due June 30. 24 29 **3**0 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RUSSELL, ESQ., W. KEVIN 18501 MURDOCK CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) SIXTH FLOOR 83 **PORT CHARLOTTE FL 33948** 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change TITLE ☐ DELETE 1.1 TITLE ☐ Addition TORNWALL, RONALD E NAME 1.2 NAME 1861 PLACIDA ROAD, SUITE 106 1.3 STREET ADDRESS STREET ADDRESS ENGLEWOOD FL 34224 CITY-ST-ZIP 1.4 CITY-\$1-2IP DELETE Change ☐ Addition TITLE 2.1 TITLE **ROMESH WEERASOORIYA, CHANDEEV** NAME 22 NAME 1861 PLACIDA ROAD, SUITE 106 STREET ADDRESS 2.3 STREET ADDRESS ENGLEWOOD FL 34224 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY- ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do 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 operation or supplemental annual roport 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 conformation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

62 NAME

DELETE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

40,207

941-474-9649

Change

Addition

497