## 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 #

636045

(7)

RICHARD E. DEUTCH, D.D.S. & ASSOCIATES OF KENDAL

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7900 SW 104TH ST. 7900 SW 104TH ST. MIAMI FL 33156 **MIAMI FL 33156** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/12/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-1920365 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing **\$5.00** May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 X Yes □ No 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DEUTCH, RICHARD E. JR. 93500 O. BING HAY: 2665 SOUTH BAYSHOCE DR. 82 Street Address (P.O. Box Number is Not Acceptable) 83 COCONUT GROVE, FL Zip Code 11. Pursuant to the provisions of Sections 507 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, apply corporations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature 12. ERS AND DIFFECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 THILE Change Addition DEUTCH, RICHARD E. NAME 1.2 NAME 9555 W. BROADVIEW DR. STREET ADDRESS 1.3 STREET ADDRESS **BAY HARBOR ISLAND FL** CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE ... Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 3 4. CITY - ST - ZIP DELETE TITLE 41 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 supplemental 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 or the receiver of 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.

SIGNATURE: