## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 556753 Corporation Name

(2)

Secretary of State

**FILED** 

May 01 1996 8:00 am

FRANI	K L. GOBE	7, D.D.S., P.A	<b>1.</b>								
Principal Place	e of Business		Mailing Addr	ess						IA BYBAL BABUL BABUL BABU	/
1800 WEST HILLSBORO BLVD. 1800 WEST HILLSBOR DEERFIELD BEACH FL 33442-1402 DEERFIELD BEACH FL											
								<ol> <li>Date Incorporated or Qualified</li> <li>12/30/1977</li> </ol>	1	of Last Report 3/07/1995	
h	lace of Business	•	2a. Mailing A	2a. Mailing Address				4. FEI Number		Applied F	For
Suite, Apt.	# oto		26				·	59-1788725		Not Appl	licable
22	#, BIG.		F, `	Suite, Apt. #, etc.				5. Certificate of Status Desired		<b>\$8.75</b> Additio	
City & State	e			City & State				6. Election Campaign Financing		Fee Required	
23			28	28				Trust Fund Contribution		\$5.00 May B Added to Fee:	
Zip		Country	Zip		Country	y		8. This corporation has liability for in	ntangible ta		
24			29	30	30			Florida Statutes Yes	□No		-,
<b> </b>	rrent Registered Age	nt	10. Name and Address of New Register				gistered /	gent			
					81	١	Varne	• • • • • • • • • • • • • • • • • • • •			
FISCHLER, MICHAEL A.					82	82 Street Address (P.O. Box Number is Not Acceptable)					
	6TH CT						···				
FT LAUI	derdale fl	33301			83	1					
					84	C	City			85 Zip Code	
44 5						-	•		FL	1 1 '	
or register	to the provisions red agent, or bo	i of Sections 607.0 th. in the State of F	0502 and 607.1508, Flo Florida: Such channe w	orida Statutes, the	above	nan	ned corporat	ion submits this statement for the purp of directors. I hereby accept the appoi	ose of cha	nging its registered	doffice
familiar wit	th, and accept t	he obligations of, S	Section 607.0505, Flori	da Statutes.	ie corp	JUI Q	mon s goarg	or orectors, I hereby accept the appoi	intment as	registered agent. I	am
SIGNATURE _											
12.	Signature, typed or pa		agent and the if assistable AND DIRECTORS			rtsg	gnature requirad v		DATE		
TITLE	DPST	OFFICERS			3.		·	ADDITIONS/CHANGES TO OFFIC			
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CITY-ST-ZIP					CITY-S				J		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 of the refleiver 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 attack by my with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank L. Gober, Pres.

4/26/96

(407) 427-4321

Daytime Prione #