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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

May 11 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

583600

(2)

FREDRIC JAY WITKIN, D.D.S., P.A.

		, , , ,			
Principal Place of Business		Mailing Address		I JOOTE BILL OLOO IILU BILIN EDIN DON DIGU B	IRII ATAIL DIALI ALALI EIRII 1881
8861 SW 69TH CT		8861 SW 69TH CT			
MIAMI FL 33156		MIAMI FL 33156		DO NOT WRITE IN TH	IC CDACE
				3. Date Incorporated or Qualified	IS SI ACE
				08/28/1978	1
2. Principal P	lace of Business	29. Mailing Address		4. FEI Number	Applied For
21 886	ol Sw 69	CT. 26 Suite Act # atc	, ,	59-1844728	Not Applicable
Suite, Apl.	#, elc	Suite, Apt. #, etc.	~4/	5. Certificate of Status Desired	\$8.75 Additional
22 MIP		D 17 27	1	5. Continuate of States Desired	Fee Required
City & Stati	θ '	City & State	• •	6. Election Campaign Financing	\$5.00 May Be
23 Zin	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip 24 33	156 25 DAO		¬ '	8. This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
24 0 0	9. Name and Address of		<u> </u>	10. Name and Address of New Registers	
Wr	TKIN, FREDRIC JAY		81 Name		
	61 SW 69TH CT		DD Charat Artif	/DO Day No to May Assessed to	
MAMI, FL			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
	156		83		
			84 City		85 Zip Code
			64 City	F	L 85 Zip Code
11. Pursuant to the provisions of Soctions 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 regis		Ingistered Agent signature requir	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
12.	PD	RS AND DIRECTORS DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	WITKIN, FREDRIC		1.2 NAME		Company Company
STREET ADDRESS	6784 SW 97TH ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI,F L 00000		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2 1 TITLE		Change Addition
NAME			22 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 City-St-Zir.	<u> </u>	
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		į
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		3.4. CITY - ST - ZIP		
TITLE		∐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		\
CITY-ST-ZIP TITLE		DELFTE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		□ otter			T Olongo T Vadi((0))
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS]
CITY OF 31D			CADITY OF TIP		i

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 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.

SIGNATURE:

STATE OF THE PREDRIC SHI WITKIN ONS PA 4/30/88 662-221