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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name 602441

(8)

DAVID W

•	EHRENREICH,	D.D.S.,	P.A.	

FILED Apr 02 1998 8:00am Secretary of State

Principal Place of Business	Mailing	Address			-{	I BY BIBN BIBN BIBN BIB	 		
13876 N KENDALL OR	13876 N	13876 N KENDALL DR							
MIAMI FL 33186		MIAMI FL 33186			DO NOT WRITE IA	LITHIC COACE			
					3. Date Incorporated or Qualified	V THIS SPACE			
					10/02/1970				
2. Principal Place of Business	2a. Maili	ng Address			4. FEI Number	I IA	pplied For		
21	26				59-1303577		ot Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75	Additional		
22	27				J. Golfficate of Clares Desired	Fee R	equired		
City & State City & State		& State			Election Campaign Financing		May Be		
Zip C		Zip Country				to Fees			
24 25	29	2	10		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30,				
9. Name and A	Address of Current Registered	Agent	- T		10. Name and Address of New Regi		7 140		
EHRENREICH, DAVI	D.W.		81	Name					
13876 N KENDALL			82	80 0					
MIAM! FL 33186			62	82 Street Address (P.O. Box Number is Not Acceptable)					
			83						
			84	City		85 Zip	Code		
				•			1		
11. Pursuant to the provisions of office or registered agent, or	Sections 607.0502 and 607.150	08, Florida Statutes	the above	named corporation	oration submits this statement for the pur on's board of directors. I hereby accept t	pose of changing i	ts registered		
agent. I am familiar with, and	accept the obligations of, Sect	ion 607.0505, Flori	da Statutes	ine corporati	on's coard of directors. Thereby accept i	ne appointment as	registered		
SIGNATURE				<u> </u>					
Signature, lypod or printe	d name of registered agent and title if applic OFFICERS AND DIFFECTORS		Registered Age	nt signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE DIDECTOR	20 11 40		
TITLE PDT	OTTIOETIS AINS SINECTONE	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change	Addition		
NAME EHRENRECICI	H. DAVID W		1.2 NAME			L Strainge			
STREET ADDRESS 13876 N. KEN		1.3 STREET ADDRESS		ADDRESS					
CITY-ST-ZIP MIAMI, FL 000			1.4 CITY-S						
TITLE		DELETE	2.1 TITLE			☐ Change	Addition		
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET	ADDRESS					
CITY-ST-ZIP			2. 4 CITY - S	T-ZIP					
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition		
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET						
CITY-ST-ZIP		Delete	3.4. CITY - S	T-7IP		—			
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NAME STREET ADDRESS			4. 2 NAME						
\			4.3 STREET						
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST 5.1 TITLE	- ZIP		Change	Addition		
NAME		and secola	5.2 NAME			onange	Roullon		
STREET ADDRESS			5.2 NAME 5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST						
TITLE		DELETE	6.1 TITLE	611		☐ Change	Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP		6.4 CITY-S		·			•		
4.4 1.1				- 4	· · · · · · · · · · · · · · · · · · ·				

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.