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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 602659

(5)

FILED Apr 10 1997 8:00am Secretary of State

JOE W. WIGGINS, D.D.S. P.A. Principal Pace of Business Mailing Address 3001 ST JOHNS AVE JACKSONVILLE FL 32205-9102								
					3. Date Incorporated or Qualified	3a. Date of		port
					01/21/1971	04/16/1		
	은 ace of Business	2a. Mailing Address			4. FEI Number	ļ		olied For
Suite Ap	A # cstc	Suite, Apt #, etc.	***************************************		59-1323140			Applicable dditional
1	. H. 6000	27			5. Certificate of Status Desired		Fee Re	
City & St	ate	City & State			6. Election Campaign Financing	\$	5.00	May Be
<u> </u>		28	T 0		Trust Fund Contribution		Added to	
- Zijo ₊1	Country	Zip	Coun	ııry	This corporation has liability for Florida Statutes	intangible tax u 12 Yes 🔲 No		199 032,
	9. Name and Address of Cur	rent Registered Agent	[30]		10. Name and Address of New Ro			
WIC	GGINS JR,JOE W			91 Name				
)1 ST. JOHNS AVE.		ļ.	82 Street Add	dress (P.O. Box Number is Not Accepta	hle		
	CKSONVILLE FL 32205				areas (F.O. Dox Number is Not Accepta			
•			[3	B3				
			} ₁	B4 City		65	Zip C	ode
				J,		FL "		
same of 1	is on turnilian with land account the ob-	Montions of Section 607 0505 F	Iorida Statu	by the corpora	ation's board of directors. I hereby acce	spr me appoint		
*	So process opposes prima a marke of registering	d agent and title if applicable (NO	TE: Rog stered		ation's board of directors. I hereby acce uited when reinstating)	DATE.		
SKGNATUR:	Same approximation of egistens	a agree area tide of applicable (NO AND DIRECTORS	TE: Rog stered	Agent signature requ		DATE CERS AND DIRI	ECTOR	3 IN 12
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14. Lido hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information and calcid on this annual report or supplemental appeal 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 chapter or on an attagriment with an address.

SIGNATURE:

MONO TYPES ON PRINTED NAME OF SAMING OFFICER ON DIRECTOR

3.31-97

388.038