

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 # 603057 (1)

1. Corporation Name

I. RUSSELL WEINSTEIN, D.D.S., P.A.



Principal Place of Business

220 N BABCOCK
MELBOURNE FL 32935

Mailing Address

220 N BABCOCK
MELBOURNE FL 32935

3. Date Incorporated or Qualified
08/31/1971

3a. Date of Last Report
01/24/1995

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. 25.

29. 30.

4. FEI Number
59-1359453

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WEINSTEIN, J. RUSSELL
220 N. BABCOCK
MELBOURNE FL 32935

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 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 type or printed name of officer, director or the corporation)

(Signature of Registered Agent required when submitting)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME
PST
WEINSTEIN, I. RUSSELL
2. STREET ADDRESS
PO BOX 361035 N/A
3. CITY-STATE-ZIP
MELBOURNE FL

☐ DELETE

1. 1. TITLE ☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY-STATE-ZIP

☐ DELETE

2. 1. TITLE ☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY-STATE-ZIP

☐ DELETE

3. 1. TITLE ☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY-STATE-ZIP

☐ DELETE

4. 1. TITLE ☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY-STATE-ZIP

☐ DELETE

5. 1. TITLE ☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY-STATE-ZIP

☐ DELETE

6. 1. TITLE ☐ Change ☐ Addition

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 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:

I. Russell Weinstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/96 (407) 254-5000
Date Filing Fee

CR2E034 (12/95)