	PLEASE REA	D ALL INS	TRUCTIO	NS BEFORE	COMPLE	TING T	HIS FORI	M.	١
CORPORATION FLO			FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED , 05 NOV 14 PH 12: 03 SECRETARY OF STATE				
DOCUMENT # 603267							TALLAH	ASSEE, FL	ORIDA
Berge	er & Miller, P.A.					_		•	
	at Office Address IW 70th Ave	333 N	3. Mailing Office Address 333 NW 70th Ave] <i>O</i> .	>	CR2E081 (8/	(05)	
_	101	1 _ `	Suite, Apt. #, etc. Suite 101		4. Date Inco	rporated or	Qualified .		
City & Stat	ation, FL	1	City & State Plantation, FL		5. FEI Numb	siness in Fl	orida 12/	/10/1971 	plied For
33317 USA		^{Zip} 33317			6.		JS DESIRED S	Not 58.75 Additional for a Certificate	Fee require of Status
	Name	7.	Name and Addre	ss of Current Register	red Agent				
	Paul E. Berger,			<u></u>			1	ł	
	3334NW 70th AV							1	
<i>;</i> ••••	Suite* 101								ĺ
	Plantation			<u></u>		State	33317		
8. I, being	appointed the registered agent of the	aboye named corp	oration, am famili	ar with and accept the o	bligations of sect		05 or 617 0503 E	<u> </u>	<u> </u>
Signature o Registered	: / <i>////</i> /		SENT MUST SIG				11/9/05		
9. Names	and Street Addresses of Each Officer	and/or Director (FI	orida nonprofit co	rporations must list at le	ast 3 directors)				P
Titles	Name of Officers and/or Directors			<u> </u>	City / State / Zip .				
Р	Paul E. Berger 333 NV			770th Ave, Suite 101 Plantation, FI				 FL 3331	

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under cath.

333 NW 70th Ave, Suite 101

SIGNATURE:

Robert J. Miller

Paul E Berger
Leichature and Tiped or Printed Name Of Signing Officer Or Director

11/9/05

(954) 791-7530

Daytime Phone #

Plantation, FL 33317

500061415635 11/14/05--01054--003 **150.00



practice limited to periodontics and implantology

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Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

October 19, 2005

To Whom It May Concern:

We have just received your "Notice of Dissolution or Revocation," which comes as quite a surprise to us. I have been calling around trying to find out what we do next, as well as what we should have done to avoid having this action taken against us. Apparently, we should have previously received a notice of some kind telling us what we needed to do to file our "2005 annual report." This notice was never received. I do not know when the notice was sent, but I know that two invoices were sent to us late in June from one of our major suppliers but never arrived. I assumed it was an isolated incident, but now I wonder what else we didn't receive.

Your automated phone message said I should send the "Corporation Reinstatement" form, the \$150 filing fee, and a letter of explanation. Please let me know if I have done anything incorrectly or if you have any additional questions. Thank you for your time and consideration in this matter.

Sincerely,

Lisa Birch

Berger & Miller, P.A.

