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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 11, 1999 8:00 am Secretary of State 03-11-1999 90017 001 \*\*\*150.00

DOCU	MENT # 604072 W BASSETT D.D.S. P.A.				之(を)()) 終格(表質 ()()()()()()()()()()()()()()()()()()()
WILLIAM	W BASSETT ON S PA				
MICEIMI			أبيا المتعلقة		
Principal Place of Business Mailing Address					
2626 E COMMERCIAL BLVD  2626 E COMMERCIAL BLVD  ET LAUDEDDALE EL 20008					
FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
_					01/04/1973
2. Principal Place of Business 2a. Mailing Address 21 Suite, Apt. #, etc. Suite, Apt. #, etc.					4. FEI Number Applied For
<del></del>	# ata				59-1428856 Not Applicable \$8.75 Additional
22 Suite, Apt. #, etc.					5. Certificate of Status Desired Fee Required
City & State City & State					6. Election Campaign Financing \$5.00 May Be
<u> </u>					Trust Fund Contribution Added to Fees
Zip	Country Zip Cou			itry	8. This corporation owes the current year Intangible
24	25		30		Personal Property Tax.
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New Registered Agent
BASSETT, WILLIAM W				oi ivaille	
2626 E COMMERCIAL BLVD FT LAUDERDALE FL 33308			Ī	82 Street Addr	ress (P.O. Box Number is Not Acceptable)
			}	83	
			Į		
				84 City	FL 85 Zip Code
AA Discount to the provisions of Sections 607 0500 and 507 1509. Elevide Statutes the above pamed corporation submits this statement for the purpose of changing its regi					
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.					
_	m ramilar with, and accept the congu	10(10 0), 0001011 001.0000, 1 0	00 01010		
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE:	Registered	Agent signature require	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	P	☐ DELETE	1.1 TIT		Change
NAME	Brookin, meer in m		1.2 NAI		
STREET ADDRESS				REET ADDRESS Y-ST-ZIP	
CITY-ST-ZIP TITLE			2.1 TIT		☐ Change ☐ Addition
NAME	BASSETT, WILLIAM W		2.2 NA		
STREET ADDRESS	ARREST COMMUNICATION OF THE PROPERTY OF THE PR		2.3 STI	REET ADDRESS	
CITY-ST-ZIP	1		4	ry-st-zip	
TITLE		☐ DELETE	3.1 TIT	LE	. ☐ Change ☐ Addition
NAME			3.2 NA	ME	
STREET ADDRESS			3.3 STI	REET ADDRESS	
CITY-ST-ZIP			_	Y-ST-ZIP	CObsess C Addition
TITLE		☐ DELETE	4.1 TIT		☐ Change ☐ Addition (
NAME			4. 2 NA		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP		☐ DELETE	4.4 CIT	Y-ST-ZIP	☐ Change ☐ Addition
TITLE NAME			5.1 III		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP				Y-ST-ZIP	
TITLE		☐ DELETE	6.1 TIT	LE	Change Addition
NAME			6.2 NA	ME	
STREET ADDRESS			6.3 ST	REET ADDRESS	
CITY PT 7ID			64 CIT	Y-ST-ZIP	

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, with all other like empowered.

SIGNATURE: