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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 604470

(5)

RICHARD A. SKRIPAK, D.D.S., PROFESSIONAL ASSOCIATION

FILED Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2215 NEBRASKA AVENUE, STE. 2H 2215 NEBRASKA AVENUE, STE. 2H FT. PIERCE FL 34950 FT. PIERCE FL 34950 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/28/1973 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1467042 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 26 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SKRIPAK, RICHARD A. 2215 NEBRASKA AVENUE - STE. 2H Street Address (P.O. Box Number is Not Acceptable) FT. PIERCE FL 33450 83 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, typed or printed name of registered against and title if applicable (NO*E: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE 1.1 THILE Change TITLE **SKRIPAK, RICHARD A.** NAME 1.2 NAME 2215 NEBRASKA AVENUE STREET ADDRESS 1.3 STREET ADDRESS FT. PIERCE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 21 TITLE SKRIPAK, FAYE NAME 2.2 NAME 2215 NEBRASKA AVENUE 2.3 STREET ADDRESS STREET ADDRESS FT. PIERCE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREE1 ADDRESS 4.4 City - St - ZiP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREE1 ADDRESS CITY+ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - 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 supplied 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 coporation of 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 phanges for on an attachment with an autress.

OIONIATURE.

4/16/94

511-464-5363