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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 604701

(3)

JERALD E. RUBIN D.M.D., P.A.

Jan 21 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address 5000 HOLLYWOOD BOULEVARD 5000 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 65					•					
1						3. Date Incorporated or Qualified 09/25/1973	Qualified 3a. Date of Last Report 02/02/1996			
1 '	lace of Business	2a. Ma	2a. Mailing Address			4. FEI Number			oplied For	
21		26					59-1488215			ot Applicable
Suite, Apt.	#, etc. TE 4	27 5	Suite, Apt. #, etc 27			5. Certificate of Status Desired			Additional equired	
City & Stat	le		City & State			6. Election Campaign Financing			May Be	
23		28	28			Trust Fund Contribution			to Fees	
Ζιρ	Country Zip Co			Cou	ntry		8. This corporation has liability fo	r intangit	e tax under s	. 199.032,
24	25	29		30				Yes		
	9, Name and Address of Curr	ent Registere	d Agent		041		10. Name and Address of New F	egistere	d Agent	
	SIN, JERALD E. D.M.D.			ļ	81	Name				
	0 HOLLYWOOD BOULEVARD LLYWOOD FL 33021				82	Street Add	ress (P.O. Box Number is Not Accept	able)		
1101	L[11000 ft 30021				83					
				İ		·				
					84	City.		F	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1	508, Florida Statu	tes, the at	ove	-named cor	poration submits this statement for the	DUTOOSA	of changing it	ts registered
office or a agent 1 a	registered agent, or both, in the Sta em familiar with, and accept the obl	ite of Florida. S ligations of, Se	Such charige was ction 607 0505, Fl	authorized orida Stat	d by utes	the corpora	tion's board of directors. I hereby acc	ept the a	ppointment as	registered
SIGNATURE	- · · · · · · · · · · · · · · · · · · ·	.,								
-giankion.	Signal we appeal or punted name or registers a	arient and fife d'asig	श्रदकोका (NO	ft: Registered	i Age	nt signature requ	ired when reinstating)	DATE		
12.	OFFICERS A	NO DIRECTO		13.			ADDITIONS/CHANGES TO OFF	ICERS A		
TITLE	RUBIN, JERALD E.		DELETE	1.1 111					Change	Addition
NAME	5000 HOLLYWOOD BLVD			1.2 NA						
STREET ADDRESS	שמון אווימאר בו				1.3 STREET ADDRESS 1.4 City-St-Zip					1
CITY-ST-ZIP TITLE	TOOL TOOL TE		DELETE	21 TF		1-2112			Change	Addition
NAME				22 N/					Ollange	, , , , , , , , , , , , , , , , , , ,
STREET ADDRESS	Ì					ADDRESS	:	4		
CITY - ST - ZIP				2 4 0		1				
THILE			DELETE	3 1 TH					☐ Change	Addition
NAME	<u> </u>			3 2 NA	ME					
STREET ADDRESS	1			3 3 51	REET	ADDRESS				
CITY - ST - ZIP			··	3 4. 0	TY-S	IT - ZIP			·····	
TOLE			DELETE	4170					Change	Addition
NAME				4 2 N						
STREET ADDRESS				•		ADDRESS				
CITY-ST-712	, , , , , , , , , , , , , , , , , , ,		DELETE	4.4 CI		T-ZIP			T Chance	Astalitian
TITLE			DELETE	5.1 Th					Change	Addition
NAME				5.2 N/						
STREET ADDRESS						ADDRESS				ļ
CITY-SF-Z-P			DELETE	5.4 CI 6.1 T/		1 · ZIP			Change	Addition
NAME	1		tund DELETE	6.2 N		}			Una Orange	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS						ADDRESS				ĺ
CITY-ST-ZIP				6.4 CI		1				

14. I do 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.

SIGNATURE:

SHALL E JULE XMD

1/12/97 954-966-1800 Dayline Proce :