FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00									FI	I E	D	
COF ANNU	RPORATION JAL REPORT Secreta			TMENT OF STATE Mortham y of State CORPORATIONS				FILED Jan 29 1998 8:00am Secretary of State				
	MENT # 60496	1	(3)	-				360	creta	ıy ()1 S t	ale
	OND J. FRANCONI, D.D.S.,	P.A.										
Principal Place	e of Business	M	ailing Address					-				
8353 S.W. 124TH ST. 8353 S.W. 124TH ST.												
MIAMI FL 331	56	,	AIAMI FL 33156						DO NOT WRI	TE IN THI	S SPACE	
								3. Date Incorporat			0 01 7102	
								01/14/1974		-		
	lace of Business	2a.	Mailing Address					4. FEI Number				Applied For
21		26						59-154621	4		1	lot Applicable
22								5. Certificate of Sta	atus Desired			Additional Required
City & State	3	28	City & State					 Election Campa Trust Fund Cont 				May Be I to Fees
Zip	Country	- 20	Zip	Cou	untry			8. This corporation				
24	25	29		30	•			Personal Proper				□ No
	9. Name and Address of Curren	t Regis	tered Agent		L.,			10. Name and Add	ress of New F	legistere	d Agent	
	ANCONI, RAYMOND J				81	Name						
8353 SW 124TH STREET					82	Street	Addres	ss (P.O. Box Number	ls Not Accept	able)		
MI/A	AMI FL 33156				83							
					84	City				F	85 Zip	Code
11. Pursuant to office or re agent. Lar	to the provisions of Sections 607.050 egistered agent, or both, in the State or familiar with, and accept the oblig	2 and 6 of Floridations of	07.1508, Florida Statute da. Such change was a f. Section 607.0505, Flo	es, the at authorize orida Stat	bove d by tutes	the cor	l corpoi poratio	ration submits this sta n's board of directors	tement for the . I hereby acc			its registered s registered
SIGNATURE			,									
	Signature, typed or printed name of registered age				d Age	nt signaturi	e required	when reinstating)		DATE		5001.4
12.	OFFICERS AN	DIREC	DELETE	1.1 TI	TIE		T	ADDITIONS/CHAI	NGES TO OFF	ICERS AI	Change	Addition
NAME	FRANCONI, RAYMOND J. DD	S		1.2 N							E Oriange	Addition
STREET ADDRESS	8353 S.W. 124TH ST.	•				ADDRESS						
CiTY - ST - ZiP	miami fl			1.4 CI	TY-SI	T-ZIP						
TITLE	SD		DELETE	2.1 11	TLE						Change	Addition
NAME	FRANCONI, RAYMOND J.DDS	}		2.2 N/	AME							
STREET ADDRESS	8353 S.W. 124TH ST.			2.3 \$1	TREET .	ADDRESS						
CITY-ST-ZIP	Miami Fl.		- December	_		T-ZIP						
TITLE			☐ DELETE	3.1 Ti							☐ Change	Addition
NAME STREET ADDRESS				3.2 NA		455550						
STREET ADDRESS City-St-Zip					3 3 STREET ADDRESS							
TITLE	DELETE			3.4. CITY-ST-ZIP 4.1 TITLE							☐ Change	Addition
NAME				4, 2 N							•	
STREET AODRESS	STREET ADDRESS			4.3 ST	4.3 STREET ADDRESS							
CITY - ST - ZIP				4,4 Cf	TY-ST	r-21P						
TITLE			DELETE	5.1 TII							Change	Addition
NAME				5,2 NA	ME							

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 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 carporation 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 granted, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

1/22/98

305-232-2570

Change

___ Addition