

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 636226 (3)

1. Corporation Name

NORMAN E. FRIEDMAN D.D.S., P.A.



Principal Place of Business

1920 PALM BEACH LAKES BLVD.
SUITE 104
WEST PALM BEACH FL 33409

Mailing Address

1920 PALM BEACH LAKES BLVD.
SUITE 104
WEST PALM BEACH FL 33409

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

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9. Name and Address of Current Registered Agent

FRIEDMAN, NORMAN E.
1920 PALM BEACH LAKES BLVD.
SUITE 104
WEST PALM BEACH FL 33409

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

09/14/1979

3a. Date of Last Report

03/16/1995

4. FEI Number

59-1935260

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

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 Agent or Director (If Not Applicable)

Signature Typed or Printed Name of Agent or Director (If Not Applicable)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PD
FRIEDMAN, NORMAN E.
1920 PALM BEACH LAKES BLVD
W. PALM BEACH FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

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13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

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31. STREET ADDRESS

32. CITY-STATE-ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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-03/21/96--01013--006

***200.00

SIGNATURE:

NORMAN E. FRIEDMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/96

407/677-2282

CR2E034 (12/95)