SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

636226

(3)

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

FILED
Aug 20 1998 8:00am
Secretary of State

- I ARAKAT BIARA INIA BUJAR INDIA PROJE BUJA BIBI BIRKI BIRKI BIRKI BIRKI BIRKI BIRKI BIRKI BIRKI BIRKI BIRKI

561-684-12P2

1 District (0)							
Principal Place of Business Malling Address						,	
1920 PALM BE SUITE 104	ACH LAKES BLVD.	1920 PALM BEACH LAK SUITE 104	1920 PALM BEACH LAKES BLVD.				
	EACH FL 33409		WEST PALM BEACH FL 33409			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						09/14/1979	
h	lace of Business	2a. Malling Address				4. FEI Number Applied For	
21 Suite Ant	4 -1-		26			59-1935260 Not Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required	
City & Stat	le	City & State	City & State				
23	•	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Coun	Country		This corporation owes or has paid the current year Intangible	
24	[25]	29	30	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curi	rent Registered Agent	ered Agent 81 Name		Name	10. Name and Address of New Registered Agent	
FRIE	FRIEDMAN, NORMAN E.						
1920	PALM BEACH LAKES BLVD.		82 Street Address (P.O. Box Numb		Street Addres	ss (P.O. Box Number is Not Acceptable)	
	TE 104					·	
WES	ST PALM BEACH FL 33409		[1	B3			
			ļ.	84	City	85 Zip Code	
				\perp		F <u>L</u>	
 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named co office or registered agent, or both, in the State of Florida. Such change was authorized by the corpor 						tion submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered	
agent I a	am familiar with, and accept the ob	ligations of, section 607.0505, I	Florida Statu	tes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature reculred when reinstating)							
12.		AND DIRECTORS	13.	d Ap	jent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITL	E		Change Addition	
NAME	FRIEDMAN, NORMAN E.		1.2 NAM	E		Citaligo E Haddion	
STREET ADDRESS	and married marriagement of the control of the cont		1.3 STR	ETA	ADDRESS		
CITY-ST-ZIP	W. PALM BEACH FL		1.4 CITY-ST		-ZIP		
TITLE		DELETE	2.1 TITL	E		Change Addition	
NAME			2.2 NAM	E		-	
STREET ADDRESS			2.3 STRE		ADDRESS		
CITY-ST-ZIP			2.4 CITY		ZIP		
TATLE		DELETE	3.1 TITLE			Change Addition	
NAME			3.2 NAM	Ε			
STREET ADDRESS			3.3 STRE	ETA	ADDRESS		
CITY-ST-ZIP			3.4 City		ZIP		
TITLE	C vereit		4.1 T/TU			Change Addition	
NAME			4,2 NAM	-			
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP TITLE		Dhriese	4.4 CITY 5.1 TITL		ZIP		
NAME		DELETE	5.2 NAM			Change Addition	
STREET ADDRESS			li i		ADDRESS		
City-S1-Zip					i		
TITLE		DELETE	5.4 CITY-ST- 6.1 TITLE		F."	Change Addition	
NAME		[6.2 NAM		İ	Change LT Addition	
STREET ADDRESS			1		ADDRESS		
CITY-ST-ZIP			6.4 CITY				
14. I hereby certify that the information supplied with this filing does not qualify for the exemptions					stated in section	on 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 (changed, or on an attachment with an address.							

IN CNORED & FRIEND D/R/SP