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

CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1996		,	Secretary of State DIVISION OF CORPORATIONS						
DOCUN 1. Corporation	MENT #	663968	•	5)						
GABF	riel e. Pichai	RDO, D.D.S., P.	A.				 	01101 Hall 0101		8141) 816)) Bigii 1881
Principal Place	of Business		Mailing Address							
1437 N.E. 1ST TERRACE			1437 N.E. 1ST TERRACE							
HOMESTEA	AD FL 33030		HOMESTEAD FL							
							3. Date Incorporated or Qualified 01/24/1980		of Last I 04/28/	
2. Principal Pla	ice of Business	<u> </u>	2a. Mailing Address				4. FEt Number 59-1963193			Applied For
Suite, Apt. #	, etc.		Suite, Apt. #, etc.						\$8.7	Not Applicable 5 Additional
2 Cdy & State		2	27			-	5. Certificate of Status Desired			Additional Required
Orty & State		2	City & State				Election Campaign Financing Trust Fund Contribution			00 May Be
Zip	Cou		Zip	Co	untry	·	This corporation has liability for		Add	ed to Fees
4	25	2	19	30		· · · · · · · · · · · · · · · · · · ·	Florida Statutes 🔲 Yes	i □ No		5 188.032,
	S. Name and Ad-	dress of Current Re	gistered Agent		81	Name	10. Name and Address of New F	Registered	Agent	
PICHAI	RDO, GABRIEL E	o os								
1437 N	I.E. 1ST TERRAC				82 3	Street Addre	ess (P.O. Box Number is Not Acceptate	ole)		
HUME	STEAD FL 33030				83					<u> </u>
NUME					1 1					
NOME					84 (City			125 7	
11. Pursuant to	the provisions of Se	ections 607 0502 and	207 1500 Elorido Pto	t des don als		City		FL		ip Code
11. Pursuant to	the provisions of Sed agent, or both, in the and accept the ob-	actions 607.0502 and the State of Florida. Su	607.1508, Florida Sta uch change was autho	tutes, the aborized by the		<u> </u>	ation submits this statement for the pui d of directors. I hereby accept the app			·
11. Pursuant to or registered familiar with	the provisions of Se d agent, or both, in t , and accept the obl	ections 607.0502 and the State of Florida. St ligations of, Section 60	607.1508, Florida Sta uch change was autho 07.0505, Florida Statu	tutes, the aborized by the tes.		<u> </u>	ation submits this statement for the pui d of directors. I hereby accept the app			·
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DOS. 4-23-96

Date Dayting Phone #