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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F07796

(8)

FILED Feb 10 1998 8:00am Secretary of State

City & State 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	DENTA	L HEALTH SERVICES OF TA	MPA, INC.		 	ANGH BARK RURU BUNU BARK RUG
12004 I DULE MARRY HAY TAMPA R. 20018   DO NOT WRITE IN THIS SPACE	Principal Plac	ce of Business	Mailina Address		I HADIINA FIII BAFA IODAI IODIF IOIIU BIK	DABAH DIGIN BICIN BIBIN DIDAH BIBAH IDDI
2 Principal Place of Business   2a, Mailing Address   4. FEI Number   Applied For   25   26   58-2060053   Not Applied For   26   58-2060053   Not Applied For   27   City & State   27   Country   28   State   6. Certificate of Status Desired   Fee Regular   28   City & State   28   State   6. Certificate of Status Desired   Fee Regular   29   Country   29   State   8. Desired of Pee Regular   29   Country   29   State   8. Desired of Pee Regular   29   Country   29   State   8. Desired of Pee Regular   29   State   State   State   State   State   State   State   State   29   State   State   State   State   State   State   State   29   State   Sta	12964 N DALE MABRY HWY TAMPA FL 33618		12964 N DALE MABRY HWY TAMPA FL 33618		DO NOT WRITE	IN THIS SPACE
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Section App # Left:   27   27   27   28   29   29   20   28   29   29   20   29   20   29   20   20	,	race of Business	h1		<b>,</b>	<del>                                      </del>
City & State  Ci		H ata	r 🏚 rock r - r - reconstruction		59-2060053	
Zp	22		27]		5. Certificate of Status Desired	Fee Required
Zep		e	l l			
10, Name and Address of New Registered Agent   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable)   10, Name and Address (P.O. Box Number is Not Acceptable   10, Name and Address (P.O. Box Number is Not Acceptable   10, Name and Address (P.O. Box Number is Not Acceptable   10, Name and Address (P.O. Box Nu	Zıp	ļ ·	Zip		8. This corporation owes or has paid	d the current year Intangible
LINSEY, DENNIS N 12064 N DALE MARRY HWY TAMPA FL 33618  82   Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the previousers of Sections 607 (1602 and 637 1508. Honds Statutes  83   84   City   FL   85   Zip Code  11. Pursuant to the previousers of Sections 607 (1602 and 637 1508. Honds Statutes)  83   84   City   FL   85   Zip Code  11. Pursuant to the previousers of Sections 607 (1602 and 637 1508. Honds Statutes)  85   80   80   City   FL   85   Zip Code  11. Pursuant to the previousers of Sections 607 (1602 and 637 1508. Honds Statutes)  85   80   City   FL   85   Zip Code  11. Pursuant to the previousers of Sections 607 (1602 and 637 1508. Honds Statutes)  85   80   City   FL   85   Zip Code  11. Pursuant to the previousers of Sections 607 (1602 and 637 1508. Honds Statutes)  85   80   City   FL   85   Zip Code  11. Pursuant to the previousers of Sections 607 (1602 and 637 1508. Honds Statutes)  85   80   City   FL   85   Zip Code  12.	24			30	_ ! · · · ·	
11. Pursuant to the provisions of Sections 602 (#49 and 607 Moles Florida Statutes, the above named corporation submits this statement for the purpose of change lite registered agent or both, in the State of Horida Statutes, the above named corporation submits this statement for the purpose of change lite registered agent or both, in the State of Horida Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent to mit director agent. I am familiar with, in the State of Horida Statutes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, in the State of Horida Statutes agent. I am familiar with and accept the objection (50 605, florida Statutes).  12. OF EICE RS AND THE CTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE PERSONAL AGENT			negistered Agent	R1 Name	10, Name and Address of New Reg	Intered Agent
TAMPA FL 33618    B3				oi ivanie		
Ball   City				82 Street Add	ress (P.O. Box Number is Not Acceptable	θ)
1. Pursuant to the processors of Sections 607 (9/2) and 607 (1508 Elicides Statutes. The above named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the collegations of Sections 607 (6/20 for decayer). The material with process of the collegations of Sections 607 (6/20 for decayer). The material with process of the collegations of Sections 607 (6/20 for decayer). The corporation's board of directors. Thereby accept the appointment as registered agent. The material with process of the collegations of Sections 607 (6/20 for decayer). The corporation's board of directors. Thereby accept the appointment as registered agent. The process of the collegations of Sections 607 (6/20 for decayer). The material with process of the collegations of Sections 607 (6/20 for decayer). The corporation's board of directors. Thereby accept the appointment as registered agent. The section of the corporation's board of directors. Thereby accept the appointment as registered agent. The section of the corporation's board of directors. Thereby accept the appointment as registered agent. The purpose of the collegation of the corporation's board of directors. Thereby accept the appointment as registered agent. The transfer of the purpose of the collegation of the corporation's board of directors. Thereby accept the appointment as registered agent. The transfer addition of the corporation's board of directors. Thereby accept the appointment as registered agent. The purpose of the collegation of the corporation's board of directors. Thereby accept the appointment as registered agent. The purpose of the registered agent. The purpose of the collegation of the corporation's board of directors. Thereby accept the appointment as registered agent. The purpose of the corporation's board of directors. Thereby accept the appointment as registered agent. The purpose of the corporation's board of directors. Thereby accept the appointment as registered agent agent agent agent agent a	IAI	MPA FL 33618		83		· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of Sc choins 607 (M/O2 and 607 M/O8. Horids Statutes, the above named corporation submits this statement for the purpose of changing its registered agent and membar with, an the State of Horids Such change was suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent and remains with, and accept the collegations of Section 607 6056, Florida Statutes   SIGNATURE	ļ					
11. Pursuant to the provisions of Scc bons 607 (KQP and 627 1108. Horida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered angent. I am familiar with, and accept the collegations of Section 607 (505, Florida Statutes.)  SIGNATURE  Squitters, byect or provide an angent angent and angent ange				84 City		85 Zip Code
SIGNATURE SIGNATURE    Control of the production of the collegation of Section (Control of Section (Contro	11 Pursuant	to the provisious of Sections 607 0502	and 607 1508 Florida Statulo	s the above-named cor	poration submits this statement for the pu	rease of shanning its registered
SIGNATURE	office or r	registered agent, or both, in the State c	CHonda, Such change was a	uthorized by the corpora	tion's board of directors. I hereby accept	t the appointment as registered
Squaders breat to protect name of registers along the dangeration   Squader   Squade		ini samilar wim, and accept the obligat	ions of Section 607.0505, No	rioa Statutes.		
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14. Thereby 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 of frusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an purificulty with an address.

SIGNATURE 1

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