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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

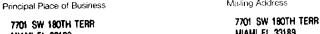
1996

DOCUMENT # **F47653**

(3)

1. Corporation Name
CHARLES L. ROSS, JR., D.D.S., P.A.

usiness Mading Address



MIAMI FL 3	33189	MIAMI FL 33189								
						3. Date Incorporated or Qualified 10/07/1981	3a. Date	of t.ast 4/04/1		
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FEI Number			Applied For Not Applicable	
a		26	26			59-2136564				
Suite, Apt. #, etc.		Suite. Apt #, etc.	,			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		Orty & State	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	7ip	Country 30			8. This corporation has liability for intangible tax under s 199 032, Florida Statutes Yes No				
	9. Name and Address of Cui	I — - I	l			10. Name and Address of New F	legistered	Agent		
				81	Name	O O De Le la Mai Accorda	'lal			
	OFF, CRAIG SW 180TH TERR		82	Street Address (P.O. Box Number is Not Acceptable)						
	SW 100111 TENN			83						
	· · · · ·			84	City		F۱	85	Zıp Code	
				1 1				$z \perp \perp \perp$		

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, typed or ported harte of registerit. OFFICERS	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
E P	DELETÉ	1 TITLE	Change Addition
ME ROSS, CHARLES L, JR		1.2 NAME	
REET ADDRESS 7701 SW 180TH TERR		1.3 STREET ADORESS	
Y-SI-ZIF MIAMI, FL 00000		1.4 CITY - ST - ZIP	Change Addition
LE	DELETE	2 1 TITLE	Change Addition
ME .		2.2 NAME	
REET ADDRESS		2.3 STREET ADDRESS	
IY - S1 - ZIP		2 4 CITY - ST ZIP	Change Addition
Lf	DELETE	3 TITLE	Change Addition
ME		3.2 NAME	
REET ADDRESS		3.3 STHEET ADDRESS	
IY-SI-2IP		3.4.0 HY - ST - ZIP	Change C Addition
ILE	DELETE	4. 1 THE	Change Addition
AME		4.2 NAME	
REEL ADDRESS		4.3 STREET ADDRESS	
TY-ST-ZIP		4 4 CH Y - ST 21F	Change Addition
Tuf	☐ DELETE	5 1 T FLE	Change C Addition
AME		5.2 NAME	
TREET ADORESS		5.3 SUREET ADDRESS	
NY-S1-ZIP		5.4 CITY - ST - ZIP	□ Change: □ Additio
RLE	DELETE	E 1 T≀TLE	Change Addition
AME		6.2 NAME	
TREE! ADDRESS		63 STREET ADOPESS	
ITY-ST-ZIP		64 CHY S1-ZIE	for the execution stated in Section 119 07(3)(s). Florida Statutes I further

14. To hereby certify that the internation supplied with this filing is voluntarily furnished and closs not qualify for the exemption stated in Section 112.07(3)(k). Florida Statutes I further certify that the information indicated on this an inal report or supplier entry afficient and accurate and that my signature shall have the same legal effect as if made under certify that I am an other or director of the corporation or the receiver of trustge empowered to provide this report as 19.1 of the 19.7 Florida Statutes; and that my name appears in Block 13 or Block 13 of hanged, or or an attachment with an address.

SIGNATURE

GNATURE AND TYPED OR PRINTED NAME OF SURVING OFFICER OR

4-16-96(305) 251-126