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Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # F56705 (9)

1. Corporation Name
RICHARD S. ALTMAN, D.D.S., P.A.



Principal Place of Business: % RICHARD S ALTMAN, 338 NORTH MAGNOLIA AVENUE, ORLANDO FL 32801
Mailing Address: % RICHARD S ALTMAN, 338 NORTH MAGNOLIA AVENUE, ORLANDO FL 32801-1656

3. Date Incorporated or Qualified: 12/01/1981
3a. Date of Last Report: 01/24/1996

2. Principal Place of Business: 21
2a. Mailing Address: 26

4. FEI Number: 59-2141259
Applied For: Not Applicable

22. Suite, Apt. #, etc.: 27

5. Certificate of Status Desired: \$8.75 Additional Fee Required

23. City & State: 28

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

24. Zip: 25 Country: 29

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes [checked] No

30

9. Name and Address of Current Registered Agent
ALTMAN, RICHARD S
338 NORTH MAGNOLIA AVENUE
ORLANDO FL 32801

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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: typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 6 rows for officers and directors. Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with a 'DELETE' checkbox.

Table with 6 rows for additions/changes. Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with 'Change' and 'Addition' checkboxes.

14. I do hereby 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 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 if changed, or on an attachment with an address.

SIGNATURE: Richard S. Altman RICHARD S. ALTMAN 4/15/97 (407) 843-877

CR2E034 (9/96)