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

PROFIT CORPORATION ANNUAL REPORT



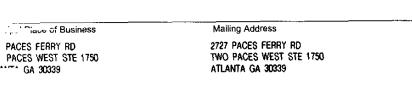
FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 OCUMENT # F97000004401

W IMAGE ORTHODONTIC GROUP, INC.





03-02-1999 90166 049 ***150.00



`' ^iav	e of Business	Mailing Address	3					
PACES FE	RRY RD	2727 PACES FEF	RY RD					
PACES WEST STE 1750 TWO PACES WEST STE 1750			ST STE 1750				0.00405	
**** GA 30339 ATLANTA GA 30339			339			DO NOT WRITE IN TH	S SPACE	
						3. Date Incorporated or Qualifed		
						08/20/1997		
rincipal Place of Business 2a. Mailing Address 26		ress			4. FEI Number		Applied For	
		26				58-2292453		Not Applicable
			Suite, Apt. #, etc.				\$8.7	5 Additional
		27				5. Certificate of Status Desired Fee Required		
ity & State			City & State			6. Election Campaign Financing	\$5.0	0 May Be
		28				Trust Fund Contribution Added to Fees		
	Country	Zip	Co	Country		8. This corporation owes the current year I	ntangible	
1.	25	29	30	•		Personal Property Tax.	Yes	□No
	9. Name and Address of Curr			T^-		10. Name and Address of New Registere	Agent	
	5. Name and Address of Con-	che regioterea Agone		81	Name			
CT CORPORATION SYSTEM								
1200 SO PINE ISLAND RD				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
				-				<u> </u>
PLAI	NTATION FL 33324			83				
				84	City		85 2	ip Code
				"	Oity	F	L -	
	OFFICERS /	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		
	m familiar with, and accept the obli							
	Signature, typed or printed name of registered a OFFICERS /					ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12
	l CD			ITLE			☐ Char	ge Addition
	COOPER, RONALD B		126	IAME	i			
. ACHMIN CC	OFA FERRY BR				ADDRESS			
AUDNESS								
ST-ZIP	ATLANTA GA 30339			HTY-S TTLE	1-219		☐ Chan	ge
	D TOURS THE THE PARTY OF THE PA	C. (go
	STOUGHTON, THOMAS B		. 2.2 N	IAME				
TEN PIEDMONT CENTER STE		E 800	2.3 9	TREET	ADDRESS			
T-ZIP	ATLANTA GA 30305			CITY-S	T-ZIP			
	D	X	DELETE 3.1 T	TLE	1	•	Char	ge 🗌 Additid
	WASSERMAN, DAVID H	·	3.2 N	IAME		•		
i Afrikat (g)	AT TOO 4 D OT		338	TREET	ADDRESS			
T-ZIP	NEW YORK NY 10004		34	CITY-S	T-ZIP			
	D	П		TTLE			☐ Char	ge Additio
ŀ	JACOBE, RONALD H JR			NAME				
					F 1000500			
I ALIONESS	1				TADDRESS			
-ZIP	NEW YORK NY 10004			CITY-S	T-ZIP		☐ Char	ge Addition
}	0	☐ DELETE		5.1 TITLE 5.2 NAME			C Cital	ge 🗀 Additio
	MEHRA, SANJEEV							
LAUDRESS	85 BROAD ST		5.3 8	TREET	TADDRESS			
:- ZIP	NEW YORK NY 10004		5.4 0	CITY-S	T-ZIP			
	V	——————————————————————————————————————						
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	CRONQUIST R M	<u> </u>		TITLE NAME			☐ Char	ge 🗌 Additio
I BIXTON CO	CRONQUIST, R M	U.	6.2 M	IAME	r address		☐ Char	ge [_] Additir
I ADDIKI 95 :_710	**** ** ***	ال	6.2 M	IAME	ì		☐ Char	ge ∐ Additi

ATLANTA GA 30339 I 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 is 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 Fig. 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (11/98)