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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

G21959

DOCUMENT # G21959 (3) 1. Corporation Name (3) LADD M. HORVATH, D.D.S., M.S., P.A.										
rincipal Flace o	of Business		Mailr	ng Address					III HAMBANI	<b>41611 (1711 116</b> )
4400 HWY. 20 E., SUITE 103 NICEVILLE FL 32578				4400 HWY. 20 E., SUITE 103 NICEVILLE FL 32578			Date Incorporated or Qualified     3a. Date of Last Report			
NICETREE PE 32370										
							02/07/1983		02/07/19	
Principal Plac	e of Business		1	lailing Address			4. FEI Number		<b> </b>	Applied For Not Applicable
L			26	in Ast & oto			59-2249155			Additional
Suite, Apt. #,	etc.		27	uite, Apt. #, etc.			5. Certificate of Status Desired			Required
City & State				ily & State			6. Election Campaign Financing		\$5.0	0 May Be
]			28				Trust Fund Contribution			d to Fees
Zip		Country	, Z	ip	Cou	ntry	8. This corporation has liability for		tax under s	199.032,
	25		29		30		Florida Statutes X Ye  10. Name and Address of New	s No	d Agent	
	9. Name an	d Address of Cur	rent Hegister	red Agent		81 Name	10. Name and Address of New	Trogratoro.	a vigoni	
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		, D.D.S., M.S.				82 Street Add	ress (P.O. Box Number is Not Accepta	abiej		
4400 HWY. 20 E., SUITE 103 NICEVILLE FL 32578						83				
NICEVILI	E FL 32370	•				84 City			. 85 Z	p Code
						O4 City		F	L	,
or registere	id agent or bo	s of Sections 607.0 oth, in the State of F the obligations of, S	-landa, Such d	inange was author	izea by the c	ve named corpo corporation's boa	oration submits this statement for the p and of directors. I hereby accept the ap	pointment	as régistered	dagent. Lam
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SIGNATURE:

Una A Horath Dora L. Horath 4/4/96 (900)897-415/
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR