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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G33704

(9)

ORAL HEALTH SERVICES, INC.

MIAMI FL

SIGNATURE:

FILED									
May 02 1997 8:00am									

SITE NOW BLUE LACOON DRIVE SIZE AND ADDRESS SIZE SIZE SIZE AND ADDRESS SIZE SIZE SIZE AND ADDRESS SIZE SIZE SIZE SIZE SIZE SIZE SIZE S										
Suit 400 MAMI FL 33128    MAMI FL 33128   MAMI FL 33128-2559   MAMI FL MAMI	Principal Place of Business Mailing Address						t samtet mand titten teite tibati antit din famt dint dint dint genet gint mitti sant			
2. Firefailed Place of Business   2a. Mailing Address   24. Mailing Address   25. Mailing Address   26. Mail	SUIET 400 SUIET 400						'			
Second   S						****************************	04/18/1983			∍port
Succession   Suc	h1	face of Business	<sub>-</sub>							
City   State   City   State   City   State   City   State   City   State   City   Country   City	Suite Apt	#. etc.	k			1 & Cartificate of Status Hesirad I I				
Country   Ze	City & State	е	City & State							
9. Name and Address of Current Registered Agent The SHUE, HENRY C.  SY757 NW BLUE LAGOON DRIVE SUTE 400 MIAMI FL 33126  63  64  City  FL  65	Ζιp		Zip	Zip Country			8. This corporation has liability for intangible tax under s. 19			
THE SHUE, HENRY C.  5775 NW BUIL LAGOON DRIVE SUITE 400 MIAMI FL 33128  62   Street Address (P.O. Box Number is Not Acceptable)  63   64   City   FL   85   Zip Code  65   66   City   FL   85   Zip Code  66   City   FL   85   Zip Code  67   City   FL   85   Zip Code  68   City   FL   85   Zip Code  69   City   FL   85   Zip Code  60   City   Fl   85	241			[30]					<del>-</del> .	
ST75 NW BLUE LAGOON DRIVE SUITE 400 MIAMI FL 33128  88 Street Address (P.O. Box Number is Not Acceptable)  89 City FL 85 Zip Code  11. Fursiant to the provisors of Sections 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered provided statement for the purpose of changing its registered provided statement for the purpose of changing its registered provided statement for the purpose of changing its registered provided and statement for the purpose of changing its registered provided and statement for the purpose of changing its registered agent, and statement for the purpose of changing its registered agent, and statement for the purpose of changing its registe	ne ·		Trogistorou Agent		B1	Name	ig, italio alla ricalida di lica ita	g. 51.01.00 F	- Igoni	
SUTE 400 MIAMI FL 33126  11. Parsurer to like provisions of Sections 607 0502 and 607 1508. Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered effect or registered agent, or both, in the State of Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered reflect or registered agent, or both, in the State of Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered reflect or registered agent, or both, in the State of Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered registered agent remotively accept the applications to be composed by the corporation's board of directors 1 hereby accept the applications to series of the content of the purpose of changing its registered registered agent. The both with and accept the above registered agent remotively accept the applications to series of the purpose of changing its registered registered agent. The both with and accept the above registered agent remotively accept the applications to series of the original as registered registered agent. The content is registered registered agent. The content is registered registered registered agent. The content is registered registered registered agent. The content is registered										
### City   FL   85   Zip Code    11. Financial to the provision of Section & 607 0502 and 607 1508. Floride Statutes the above-named corporation submits this statement for the purpose of changing its registored office or registered registered registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the changing its registored agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the epoperiment as registored agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the epoperiment as registored agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the epoperiment as registored agent, or both, in the State of Florids. Such change was authorized by the corporation submits this statement for the purpose of changing its registored agent, or both, in the State of Florids. Such change was authorized by the corporation submits this statement for the purpose of changing its registored agent, or both, in the State of Florids. Such change was authorized by the corporation submits this statement for the purpose of changing its registored agent, or the purpose of changing its registored agent, or the purpose of changing its registored agent of the purpose of changing its registored agent of the purpose of changing its registored agent of corporation's board of directors. Thereby accept the ophysical as registored agent of purpose of changing its registored agent of purpose of changing its registored agent of purpose of changing its registored agent of purpose of the				82 Street Add			dress (P.O. Box Number is Not Acceptable)			
11. Fursioner 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 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, 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, 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, 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, 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, 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, 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, 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 directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such changes was authorized by the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent.  12.  12.  12.  12.  12.  12.  12.  1					83	+				
11. Forestant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered injent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I heroby accept the appointment as registered appeal. The farmalian will, and accept the obligations of, Section 607 6506, Florida Statutes.    SIGNATURE	1911/34	III 1 E 001E0								
SIGNATUSE    Signature type to product Amount of Angeles and Directors   13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   12.   TITLE   CEO/Director   Change   Addition   Change   Addition   Change						•		FL	11	
12. OF FICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE PRES SHAPRO, STANLEY D SHELL ALDRESS SHELL ALDRESS SHAPRO, STANLEY D SHAPRO, STANLEY D SHAPRO, STANLEY D SHELL ALDRESS SHAPRO, STANLEY D SHAP		to the provisions of Sections 607.050 registered agent, or both, in the State on familiar with, and accept the oblig	uz and 607, 1508, Florida State e of Florida. Such change war pations of, Section 607,0505,	utes, the at s authorized Florida Stat	d by utes.	-named corpo the corporatio	oration submilist this statement for the pon's board of directors. I hereby accept	pt the appo	changing is bintment as i	registered
THE NAME SHAPRO, STANLEY D SA21 SW 114TH STREET	Signation at	Sign vive. I great or posted name of registered ag	eor and title if applicable (N	O16 Registered	l Ager	nt signature requires				
SHAPIRO, STANLEY D SHEEL ADDRESS SHAPIRO, STANLEY D SHEEL ADDRESS SHAPIRO, STANLEY D SHEEL ADDRESS SHAPIRO, STANLEY D SHAPIRO, S SHAPI										
SHELL ALDRESS CAY ST 2P MAMM FL  THE VP  LEVINE, HOWARD D  12101 SW 89TH AVENUE  MIAM FL  12 STREET ADDRESS 1421 SW 114TH STREET  NAME  LEVINE, HOWARD D  12101 SW 89TH AVENUE  MIAM FL  SEC  COO/Director  Levine, Howard  5775 Blue Lagoon Drive, Suite 400  MIAM FL  SEC  MIAM FL  SEC  COO/Director  Levine, Howard  FT SE  MIAM FL  SEC  MIAM FL  SEC  COO/Director  MIAM FL  SEC  COO/Director  Levine, Howard  FT SE  MIAM FL  SEC  COO/Director  MIAM FL  SEC  COO/Director  MIAM FL  SEC  MIAM FL  SEC  MIAM FL  SEC  MIAM FL  SEC  COO/Director  MIAM FL  SEC  MIAM FL  SEC  COO/Director  MIAM FL  SEC  COO/Director  MIAM FL  SEC  MIAM FL  SEC  COO/Director  MIAM FL	1111.6		LAN DELETE						L_  Change	Addition
MIAMI FL   LACITY-ST-ZIP   Miami, Florida   33126   Miami, Florida   33126   Miami, Florida   Miami, Flori	NAME:			l l		411	e Shue, Henry C.			100
LEVINE, HOWARD D   LEVINE, HOWARD D   12101 SW 89TH AVENUE   MIAMI FL	STREET ADDRESS			1.3 ST	REET	ADDRESS >/	(/> prine ragoou n	rive,	, Suit	.e 400
LEVINE, HOWARD D   12101 SW 89TH AVENUE	<b>-</b>	I	DELETE			- ZIP <b>M1</b>	ami, Florida 33	126	05	XI sare
12101 SW 89TH AVENUE   2.3 SIREET ADDRESS   57.75 Blue Lagoon Drive, Suite 400	İ		LA DELETE					ctor	unange	PS Add tion
MIAMI FL  IDLE  SEC NATTBOY, GERALD DDS SUBSECT ADDRESS COLVEST-ZIP  THES SETATE OF DAVID RUBIN SUBSECT ACCORESS CULT SI ZIP  IDLE  DCEO  NAME NAMI FL  DCEO  TIE SHUE, HENRY C SUBSECT ADDRESS CULT SI ZIP NAME  SEPERALDORESS CULT SI ZIP NAME  SEPERALDORESS CULT SI ZIP NAME  SERVER ALDORESS COLT SI ZIP NAME  SERVER ALDORESS COLT SI ZIP NAME  SERVER ALDORESS COLT SI ZIP NAME  SERVER ALDORESS AL CITY SI ZIP NAME  SERVER ALDORESS	1	1	/			4 Sh	apiro, Stanley			
SEC   MATTBOY, GERALD DDS   1421 SW 116TH AVENUE   33 STREET ADDRESS   1421 SW 116TH AVENUE   PEMBROKE PINES FL   Miami, Florida 33126	1					ADDRESS 57	75 Blue Lagoon D	riye,	, Suit	e 400
NAME SIFE LADORESS CHY-SI-ZIP TRES CHY-SI-ZIP TRES CHY-SI-ZIP TRES CHY-SI-ZIP TRES CHY-SI-ZIP NAME SIREF ACDRESS CHY-SI-ZIP TRES CHY-SI-ZIP TRES CHY-SI-ZIP NAME SIREF ACDRESS CHY-SI-ZIP TRES CHARLES D Change Addition TRES CHY-SI-ZIP TRES CHARLES D Change Addition	***************************************		TX DELETE					126	Channe	Addition
SIFECT ADDRESS CHY-ST-ZIP THES TRES STATE OF DAVID RUBIN SIREF ADDRESS CHY-ST-ZIP HIGH NAME SIREF ADDRESS CHY-ST-ZIP HIGH NAME SIREF ADDRESS CHY-ST-ZIP HIGH NAME STATE OF DAVID RUBIN STATE ADDRESS STATE ADDRESS STATE OF DAVID RUBIN STATE ADDRESS STATE AD			E-3 otter						Cuantic	Manufich
PEMBROKE PINES FL TRES STATE OF DAVID RUBIN SIREF ACDRESS CITY ST ZIP HIGH NAME NAME SIREF ACDRESS CITY ST ZIP NAME SIREF ACDRESS CITY ST ZIP NAME SIREF ADDRESS CITY ST ZIP NAME NAME SIREF ADDRESS CITY ST ZIP NAME SIREF ADDRESS CITY ST ZIP NAME SIREF ADDRESS ALCITY-ST-ZIP MIAMI FL DCEO TIE SHUE, HENRY C 126 ORQUIDEA AVENUE MIAMI FL DCITY ST ZIP NAME SIREF ADDRESS COLOR ST ZIP MIAMI FL SIREF ADDRESS SIREF ADDRESS SIREF ADDRESS SIREF ADDRESS ST ZIP MIAMI FL SIREF ADDRESS SIRE	1		/						A	- 100
TRES STATE OF DAVID RUBIN STREF ACDRESS CULT SLIZIP HIGH NAME SIRSET ADDRESS CULT SLIZIP TIELE  NAME SIRSET ADDRESS CULT SLIZIP NAME SIRSET ADDRESS CULT SLIZIP NAME SIRSET ADDRESS CULT SLIZIP NAME NAME SIRSET ADDRESS CULT SLIZIP CHANGE ADDRESS COLT SLIZIP SIRSET ADDRESS COLT SLIZIP SI						T 200 MA	1) prine ragoon n	rive,	, Suit	e 400
NAME STREEF ACCRESS CHI SLZIP THELF NAME STREEF ACCRESS CHI SLZIP THELF NAME STREEF ACCRESS CHI SLZIP THELF NAME NAME STREEF ACCRESS CHI SLZIP THELF NAME NAME STREEF ACCRESS CHI SLZIP THELF NAME STREEF ACCRESS THE SHUE, HENRY C 126 ORQUIDEA AVENUE MIAMI FL  D  STREEF ACCRESS THE SHUE, HENRY C 126 ORQUIDEA AVENUE MIAMI FL  STREEF ACCRESS STREEF ACCRE	<b></b>		X DELETE			So So	oretery/Director	140	Change	X Addition
SIRFE ALDRESS CITY ST ZIP THEF NAME SIRFET ALDRESS CITY ST ZIP THEF NAME SIRFET ALDRESS CITY ST ZIP THEF NAME SIRFET ALDRESS CITY ST ZIP THEF NAME NAME NAME NAME NAME NAME NAME NAME		1112	MAD INCOME							
MIAMI FL DCEO NAMI SIEVET ALORISS CHY ST ZIP THELF DAMM FL DCEO MIAMI FL S1 DELETE S1 TITLE S2 NAME S3 STREET ADDRESS MIAMI FL S4 CHY-ST-ZIP THELF D MIAMI FL S4 CHY-ST-ZIP THELF D MIAMI FL S4 CHY-ST-ZIP S1 Addition Change Addition S2 NAME S3 STREET ADDRESS S4 CHY-ST-ZIP THELF D Change Addition Change Addition Change Addition Change Addition Change Addition Addition ALENIER, CHARLES D		OF ALCOHOL SAFTLE COUNT				Annoece 57	775 Divo Toccom D		C3 L	- 400
TIE SHUE, HENRY C  SIPSET ALORESS  LOTY ST ZIP  NAME  ALENIER, CHARLES D  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.1 TITLE  6.2 NAME  6.2 NAME						1.710 Mi	ami. Florida 33	1266,	, surt	.e 400
NAME			K DELETE			- Liu	j radrada oo			Addition
SIRNET ALORISS UTY ST ZIP HIAMI FL  S1 STRET ADDRESS  MIAMI FL  S4 CITY-ST-ZIP  TILL  NAMI  ALENIER, CHARLES D  S3 STREET ADDRESS  54 CITY-ST-ZIP  61 TITLE  62 NAME				- 8						
UTY ST ZIP MIAMI FL 54 CITY-ST-ZIP  TILLE D SALENIER, CHARLES D 61 TITLE 62 NAME  SALENIER, CHARLES D 62 NAME	!					ADDRESS	· ·			
TITLE D SI DELETE 61 TITLE Change Addition NAME ALENIER, CHARLES D 62 NAME	į.					i				
NAME ALENIER, CHARLES D 62 NAME	P		<b>X</b> DELETE						Change	Addition
ATAP ANAL PALID ATRIPT APAA	i	_	<del></del>						- *	
STREET ADDRESS   9/30 NW 52NU STREET #502 63 STREET ADDRESS	SIB: ET ADORESS	9735 NW 52ND STREET #502	?			ADDRESS				

Date

Daylimir Prioce #

64 CITY-ST-ZIP 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.