2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

	MINUAL	EPONI (AN)	<i></i>	FILLU
DOCUMENT # H15948  1. Entity Name				Feb 04, 2004 08:00 AM Secretary of State
JAY COHEN, D.D.S., P.A.				Secretary of State
Principal Place of Business Mailing Address				-
4993 W. ATLANTIC AVENUE DELRAY BEACH FL 33445 US		4993 W. ATLANTIC AV DELRAY BEACH FL 33: US		3 1980)(17 (1881 1881 1887) 1883 (1884 1884 1884 1884 1884 1884 1884 188
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		MOORE CR2E034 (11/03)
City & State		City & State		4. FEI Number 59-2436231 Applied For Not Applicable
Zıp	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent
COHEN, JAY A.			Name	
4993 W. ATLANTIC AVE. DELRAY BCH. FL 33445			Street Address	(P.O. Box Number is Not Acceptable)
			City	Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept				
the obligat	tions of registered agent.	or the purpose or changing its r	egistered office of regist	ered agent, or both, in the state of Florida. I am familiar with, and accept
SIGNATURE				
	ILE NOW!!! FEE IS \$150.00	·		
After May 1, 2004 Fee will be \$550.00  Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	COHEN, JAY		NAME	
STREET ADDRESS CITY - ST - ZIP	4993 W ATLANTIC AVE DELRAY BEACH FL		STREET ADDRESS	
	ST BEACH PE		C(TY - ST - ZIP	
TITLE NAME	COHEN, JAY	☐ Delete	TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS	4993 W ATLANTIC AVE		STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL		CITY - ST - ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	U00000035779 02/06/04-80031-022 150.00
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	02/06/04-80031-022 150.00
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	
TITLE		☐ Delete	THTLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY~ST-ZIP	
TITLE NAME		L_I Delete	TITLE NAME	☐ Change ☐ Addilion
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
12. Thereby o	certify that the information supplied with	this filing does not qualify for t	the evernation stated in S	Section 119 07(3)(i) Florida Statutes i further certify that the information

Interection certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE:

Date

Daytine Phone Prices

Daytine Phone Page 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes in Grand Indicated in Section 119.07(3)(i), Flori