FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1996		5.7 Dr	VISION OF CORPO	DRATIONS				
DOCUN 1. Corporation	MENT #	K77280)	(1)					
		COIN, D.M.D.,							
Principal Place	of Business		Mailing Addre	ess		I ABBIBLIA BAI IBBIA BBBAG AIDDE	illif odel biola bron	 	IIII VIKI IDU
800 EAST OC STUART FL 3			800 EAST (STUART FL	OCEAN BLVD. 34994					
•	Tovi		V ·•····	. 9304		3. Date Incorporated or Qualifie	ed 3a. Date	of Last Be	nort
						04/03/1989	1	/19/199	
2. Principal Pla	ce of Business		2a. Maling Ad	odress		4. FEI Number 65_0114002			pplied For
Suite, Apt. #	I, etc.		Suite, Apt	r. #, etc.		65-0114082		,	lot Applicable Additional
2			27			5. Certificate of Status Desired		Fee F	lequired
Oity & State			City & Sta	ite		Election Campaign Financing Trust Fund Contribution	, D		May Be
Ζφ		ountry	Zip		Country	8. This corporation has liability t		•	to Fees 199.032,
4	25	- A Domant	29	30	···	Florida Statutes	ves □No		
	9. Name and A	Address of Current	Registered Age	nt	81 Name	10. Name and Address of Nev	v Registered A	.gent	
DUCOIN	, FRANCIS JOHI	N				TO De Marrie & Mad Arrow			
800 EAS	T OCEAN BLVD				82 Street Add	lress (P.O. Box Number is Not Accep	table)		
	FL 34994				83	··· · · · · · · · · · · · · · · · · ·			
					L			85 Zip	Code
or registere	ed agent, or both, it	Sections 607,0502 a n the State of Florida obligations of, Section	i. Such chance wa	as authorized by the	84 City above named corporation's boa	ration submits this statement for the ard of directors. Thereby accept the a	FL purpose of char prointment as r	l l	printered office
familiar with	ed agent, or both, in h, and accept the c	n the State of Fiorida	n Such change want 627.0505, Florid	as authorized by the da Statutes.	ibove named corpore corporation's boa	ard of directors. Thereby accept the a	ppointment as r	nging its re registered .	gistered offic agent. Fam
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SIGNATURE:

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/86 407 287 C159