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

14. Thereby certify that the information supplied with this indicated on this annual report or supplemental min officer or director of the corporation or the proliver Block 12 or Block 13 if changed, or on a public of the corporation of the proliver block 12 or Block 13 if changed, or on a public of the corporation of the corporation

FILED May 11 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L05839 (0)CASANOVA & IMHOFF, D.M.D., P.A. Principal Place of Business Mailing Address % REGISTERED CORPORATE AGENTS INC % REGISTERED CORPORATE AGENTS INC 612 SOUTH GREENWOOD AVENUE 612 SOUTH GREENWOOD AVENUE DO NOT WRITE IN THIS SPACE CLEARWATER FL 34616 CLEARWATER FL 34616 3. Date Incorporated or Qualified 07/31/1989 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2963350 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees This corporation owes or has paid the ourrent var Intangible Personal Property Tax due June 30. 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name REGISTERED CORPORATE AGENTS INC **812 S GREENWOOD AVE** 82 Street Address (P.O. Box Number is Not Acceptable) 83 CLEARWWATER FL 34698 11. Pursuant to the previsions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Gueri change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of precion 607 0505, Florida Statutes. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE CASANOVA, MAITE NAME 1.2 NAME 11508 N 58TH ST. STREET ADDRESS 1.3 STREET ADDRESS TEMPLE TERRACE FL 33617 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE IMHOFF, GREGORY S. NAME 2.2 NAME 11508 N 56TH ST. STREET ADDRESS 2.3 STREET ADDRESS TEMPLE TERRACE FL 33617 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHY-S1-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELFTE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information finual person is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an a state of the same state of the same state of the same appears in address.

C/2 1-0 873/959-222