FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

DOCUMENT # L12260 (0)

1. RICHARD MARROTTE, O.D., P.A.

APPROVED AND FILED

95 MAY -1 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business:
C/O DEERCREEK PLAZA
119 N. POWERLINE RD
DEERFIELD BCH FL 33442
US

Mailing Address:
% RICHARD MARROTTE
~~8559 BOCA RIO DR~~
~~BOCA RATON FL 33433~~

3. Date Incorporated/Qualified: 08/22/1989
3a. Date of Last Report: 06/03/1994

2. Place of Business (Street Address)
21
Suite Apt. # or
22
City, State
23
24 25

2a. Mailing Address
26 DEERCREEK PLAZA
Suite Apt. # or
27 119 N. POWERLINE RD.
City, State
28 DEERFIELD BEACH, FL
29 33442 30 BROWARD

4. FEI Number: 65-0143537 — Applied For / Not Applicable
5. Certificate of Status Desired: $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: $5.00 May Be Added to Fees
8. This Corporation has authority to transact business in Florida Statutes: Yes / No

9. Name and Address of Current Registered Agent

MARROTTE, RICHARD
~~8559 BOCA RIO DR~~
~~BOCA RATON FL 33433~~

10. Name and Address of New Registered Agent

81 Name: MARROTTE, RICHARD
82 Street Address (P.O. Box Number is Not Acceptable): 119 N. POWERLINE RD.
83
84 City: DEERFIELD BEACH FL 85 Zip Code: 33442

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with, and hereby accept the obligations of registered agent.

SIGNATURE: [signature] 3/8/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MARROTTE, RICHARD
STREET ADDRESS	8559 BOCA RIO DR
CITY, ST, ZIP	BOCA RATON FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP ☑ Change ☐ Addition
NAME	MARROTTE, RICHARD
STREET ADDRESS	119 N. POWERLINE RD.
CITY, ST, ZIP	DEERFIELD BEACH, FL 33442

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered officers and directors, where indicated above.

SIGNATURE: [signature] 3/8/95 305-429-9600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0261958 CP