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PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L60336

CARLOS F. APONTE, D.D.S., P.A.

FILED Feb 12, 1999 8:00am **Secretary of State**

02-12-1999 90025 033 ***150.00

Principal Place of Business		. Mai	Mailing Address					#21 # 1811 B1811 B1911 B	inti midit ikat		
C/O CARLOS F. APONTE 9572 SW 137 AVENUE MIAMI FL 33186		9572	C/O CARLOS F. APONTE 9572 SW 137 AVENUE MIAMI FL 33186				DO NOT WRITE IN T	HIS SPACE			
		1000					3. Date Incorporated or Qualifed			1	
								03/27/1990			
2. Principal Place of Business			2a.	2a. Mailing Address				4. FEI Number		plied For	
21			26					65-0181732		t Applicable	
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 / Fee Re		,,,
City & State			28	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	•	
Zip		Country		Zip Country				a. This corporation owes the current year	r Intangible		1
24	2	5	29		30			Personal Property Tax.	¥Yes	□No	
	g, Name a	nd Address of Cu	rrent Registe	ered Agent		L,		10. Name and Address of New Registe	red Agent	-	
450	NTE 04010	٠.	.,			81	Name				
APONTE, CARLOS F. 9572 SW 137 AVENUE					82	Street Ad	dress (P.O. Box Number is Not Acceptable)				
MAIM	VII FL 33186					83					1
						84	City		85 Zip (Code	
44 Purcuant								maration authority this statement for the purpose	of changing its	registered	1
office or r	registered agei	it, or both, in the S	tate of Florida	i7.1508, Florida Statute a. Such change was a Section 607.0505, Flor	uthorized	d by t	the corpora	rporation submits this statement for the purpos tion's board of directors. I hereby accept the a	opointment as re	gistered	
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14. I 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 attaction with an advices, with all other like empowered.

SIGNATURE: __