

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

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L67281 (0)

1. Corporation Name
FELIX JIMENEZ, D.D.S., P.A.



Principal Place of Business % FELIX JIMENEZ 117 W ROBERTSON ST BRANDON FL 33511	Mailing Address % FELIX JIMENEZ 117 W ROBERTSON ST BRANDON FL 33511
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/19/1990

2. Principal Place of Business 21 Felix JIMENEZ	2a. Mailing Address 26 Felix Jimenez
Suite, Apt. #, etc. 22 1402 OAKFIELD DRIVE	Suite, Apt. #, etc. 27 1402 OAKFIELD DRIVE
City & State 23 BRANDON FL	City & State 28 BRANDON FL
Zip 24 33511	Country 25 USA
Zip 29 33511	Country 30 USA

4. FEI Number
59-2996964

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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

JIMENEZ, FELIX
117 W ROBERTSON ST
BRANDON FL 33511

10. Name and Address of New Registered Agent

81 Name **Felix Jimenez**

82 Street Address (P.O. Box Number is Not Acceptable)
1402 OAKFIELD DRIVE

83

84 City **BRANDON** FL 85 Zip Code **33511**

11. Pursuant to the provisions of Sections 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. Such 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 Section 607.0505, Florida Statutes.

SIGNATURE *Felix Jimenez* **1/14/98**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE D	DELETE <input type="checkbox"/>
NAME JIMENEZ, FELIX	
STREET ADDRESS 117 W ROBERTSON ST	
CITY-ST-ZIP BRANDON FL	
TITLE	DELETE <input type="checkbox"/>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	DELETE <input type="checkbox"/>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 attachment with an address.

SIGNATURE: *Felix Jimenez* **1/14/98** **813-654-8772**

REQUIRED

CFR2E034 (10/97)