

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L74770 (3)

1. Corporation Name

DENTAL ADMINISTRATORS, INC.

Principal Place of Business

% KTG& S REGISTERED AGENT CORP
1401 BRICKELL AVE., STE. 700
MIAMI FL 33131

Mailing Address

% KTG& S REGISTERED AGENT CORP
1401 BRICKELL AVE., STE. 700
MIAMI FL 33131

2. Principal Place of Business

2a. Mailing Address

21 5775 NW BLUE LAGOON DR.

26 5775 NW BLUE LAGOON DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 400

27 SUITE 400

City & State

City & State

23 MIAMI, FL

28 MIAMI, FL

Zip

Zip

Country

24 33126

25 USA

29 33126

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/21/1990

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0225781

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 liability for intangible tax under s. 199.032
Florida Statutes

☒

Yes

☐

No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature typed or printed name with title (print name)

(If the Registered Agent's signature is required, please print name)

(Date)

12. OFFICERS AND DIRECTORS

TITLE DT
NAME RUBIN, DAVID
STREET ADDRESS 5775 BLUE LAGOON DR #400
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE DS
NAME ALENIER, CHARLES
STREET ADDRESS 5775 BLUE LAGOON DR #400
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE DP
NAME TIE SHUE, HENRY
STREET ADDRESS 5775 BLUE LAGOON DR #400
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE
12 NAME ESTATE OF DAVID RUBIN
13 STREET ADDRESS 8544 SW 115th COURT
14 CITY-ST-ZIP MIAMI, FL 33173

21 TITLE ☐ Change ☐ Addition

22 NAME ☐ Change ☐ Addition

23 STREET ADDRESS ☐ Change ☐ Addition

24 CITY-ST-ZIP ☐ Change ☐ Addition

31 TITLE ☐ Change ☐ Addition

32 NAME ☐ Change ☐ Addition

33 STREET ADDRESS ☐ Change ☐ Addition

34 CITY-ST-ZIP ☐ Change ☐ Addition

41 TITLE ☐ Change ☐ Addition

42 NAME ☐ Change ☐ Addition

43 STREET ADDRESS ☐ Change ☐ Addition

44 CITY-ST-ZIP ☐ Change ☐ Addition

51 TITLE ☐ Change ☐ Addition

52 NAME ☐ Change ☐ Addition

53 STREET ADDRESS ☐ Change ☐ Addition

54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE ☐ Change ☐ Addition

62 NAME ☐ Change ☐ Addition

63 STREET ADDRESS ☐ Change ☐ Addition

64 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), 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 addendum with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HENRY C. TIE SHUE PRESIDENT

Apr. 30, 1996

262-1333

Daytime Phone

CR2E034 (12/95)

L74770

2-2

BOARD OF DIRECTORS NAMES AND ADDRESSES

Dir Dr. Melvin Gober
30720 Old Still Lane
Ft. Lauderdale, FL 33331

Dir Dr. Harvey Caplin
2800 Island Blvd., Apt. 2803
Williams Island, FL

Dir Dr. Howard Levine
12101 SW 89th Avenue
Miami, FL 33156

Dir Dr. Stanley Shapiro
8421 SW 114th Street
Miami, FL 33156

Dir Jerome Summers
6260 SW 118th Terrace
Miami, FL 33156

Dir Norman Russ
9350 West Bay Harbor Drive
Bay Harbor, FL 33154

Dir Edwin Birns
21300 An Simeon Way N2
North Miami Beach, FL 33179

Dir Harry Berkowitz
2225 NE 204th Street
North Miami Beach, FL 33180

Dir Gerald Nattboy
701 NW 155th Terrace
Pembroke Pines, FL 33028

Dir Alvin Krasne
4801 Taylor Street
Hollywood, FL 33021

Dir Lawrence Krasne
1980 NE 191 Drive
North Miami Beach, FL 33179