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FILED
May 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L79281

(6)

1. Corporation Name

~~DENTAL NETWORK, INC.~~
OHS, INC.

NC 315197

Principal Place of Business

5775 NW BLUE LAGOON DR.
SUITE 400
MIAMI FL 33126

Mailing Address

5775 NW BLUE LAGOON DR.
SUITE 400
MIAMI FL 33126-2071

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

SHUE, HENRY C. TIE
5775 BLUE LAGOON DR.
STE. 400
MIAMI FL 33126

3. Date Incorporated or Qualified

06/07/1990

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0274594

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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 of registered agent and title. If applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	SHUE, HENRY C. TIE	5775 BLUE LAGOON DR.	MIAMI FL	☒
TD	ESTATE OF DAVID RUBIN	8544 SW 115TH COURT.	MIAMI FL 33173	☒
SD	ALENIER, CHARLES	5775 BLUE LAGOON DR.	MIAMI FL	☒
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
CEO/Director	Tie Shue, Henry C.	5775 Blue Lagoon Drive, Suite 400	Miami, Florida 33126	☐	☒
CD0/President/Director	Shapiro, Stanley	5775 Blue Lagoon Drive, Suite 400	Miami, Florida 33126	☐	☒
COO/Director	Levine, Howard	5775 Blue Lagoon Drive, Suite 400	Miami, Florida 33126	☐	☒
Secretary/Director	Hilinski, Scott F.	5775 Blue Lagoon Drive, Suite 400	Miami, Florida 33126	☐	☒
				☐	☐
				☐	☐

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)