

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 17, 2001 08:00 AM****Secretary of State****DOCUMENT # N98000000716****1. Entity Name**

M.A.D. D.A.D.S. OF MIAMI-DADE, INC.

Principal Place of Business

1428 NW 63RD ST

MIAMI
33147

FL

Mailing Address

P O BOX 680370

MIAMI
33168

FL

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number**65-0841177**

Applied For

Not Applicable

5. Certificate of Status Desired**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**CHESTER WALLACE BJR.
1441 N.W. 137TH STREETMIAMI
33167

US

FL

7. Name and Address of New Registered Agent**Name**

CHESTER WALLACE BJR.

Street Address (P.O. Box Number is Not Acceptable)
501 N. BISCAYNE RIVER DR.City
MIAMI

FL

Zip Code
33169**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.**SIGNATURE **WALLACE B. CHESTER, JR.****04/17/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW:
FEE IS \$61.25****9. Election Campaign Financing
Trust Fund Contribution.****\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State****10. OFFICERS AND DIRECTORS****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
D	BENDROSS-MINDINGALL DOROTHY	1895 NW 75TH ST	MIAMI FL 33147				
D	LAWRENCE LONNIE	831 NW 207TH ST	MIAMI FL 33169				
D	RAO TRESHA	7900 NE 2ND AVE	MIAMI FL 33138				
PED	CHESTER WALLACE B	1441 NW 137TH ST	MIAMI FL 33167				

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wallace B. Chester, Jr.

Pres

04/17/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)