2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000000716

City-St-Zip: MIAMI, FL 33147

Entity Name: M.A.D. D.A.D.S. OF MIAMI-DADE, INC.

FILED Apr 30, 2003 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place of Business:				
1428 NW 6 MIAMI, FL							
Current M	lailing Addre	ess:	New Mailing Address:				
P O BOX 6 MIAMI, FL							
FEI Number:	: 65-0841177	FEI Number Applied For ()	FEI Number Not App	icable ()	Certificate	of Status Desired (X)	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
	, WALLACE CAYNE RIVE 33169 US	R DR.					
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	d office or reg	istered agent, or both,	
SIGNATUR	RE:						
	Electro	onic Signature of Registered Ag	ent		Da	ate	
OFFICERS	S AND DIRE	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PED (CHESTER, W 1441 NW 137 MIAMI, FL 33	TH ST	Title: Name: Address: City-St-Zip:		() Change ()	Addition	
Title: Name: Address: City-St-Zip:	D (RAO, TRESH 7900 NE 2ND MIAMI, FL 33	AVE	Title: Name: Address: City-St-Zip:	D TAYLOR, DO 1490 NW 52 MIAMI, FL 3	STREET	Addition	
Title: Name: Address: City-St-Zip:	D (LAWRENCE, 831 NW 207T MIAMI, FL 33	'H ST	Title: Name: Address: City-St-Zip:	D SMITH, AL 6733 SW 20 MIRAMAR, F		Addition	
Title: Name: Address:	,	X) Delete MINDINGALL, DOROTHY 'H ST	Title: Name: Address:		() Change ()	Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: WALLACE B. CHESTER PRES 04/30/2003