2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000028327



FILED Feb 24, 2003 8:00 am Secretary of State

TITLE MAME MAME MAME MAME MAME MAME MAME MAM	BOCA GREENS DENTAL ASSOCIATES INC.							02-24-2003 90222 00	6 ***15	0.00	
Sulle, Apt. 4, etc. Sulle, Apt. 4, etc. City & State Ci	C/O DR. LEE HERMAN 8903 GLADES ROAD #7			C/O DR. LEE HERMAN 8903 GLADES ROAD #7				- 			
City & State Country Country Country S. Cartificate of Status Desired SA. 75. Additional Fee Required GRANAT, MITCHELL ESO, 1215 SE 2 AVENUE #201 FORT LAUDERDALE FL 33316 City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code Street Address (P.O. Box Number is Not Acceptable) FL Zip Code 8. The above named entry submits this statement for burgons of changing its registered office or registrated agent, or both, in the State of Floride. I am familiar with, and accept the collegations of registered agent. FLE NOW!!! FEE IS 150.00 After May 1, 2003 Fee will be \$55.00 Make Cheech Payable to Florida, Department of State 10.	2. Principal	Place of Business	3. M	3. Mailing Address							
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	2. I hereby ce	ertify that the information supplied with the	is filing o	does not availify for the			nation di	10.07(0)(1) 51 11 01			

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information 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 10 or Block 11 if

SIGNATURE:

SIGNATURE RECAIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #