2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2004 8:00 am Secretary of State

P03000022136 1. Entity Name NEIL O DEPERALTO DMD PA					•	-	04-07-2004 90033 039 ***150.00			
					<u> </u>	04-07-2004 90033 039 *****150.00				
Principal Place of Business Mailing Address 609 LIVE OAK LANE 609 LIVE OAK I			_ -			_		7100		
	AK LANE . 33327		9 LIVE OAK LANE Ston, FL 33327		<u>.</u>	3 (HDROTT) (I		5402'	1001 11 1001	
. Principal f	Place of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01082004	·		·	
City & State		City & State				4. FEI Number Applied For Not Applicable				
Zip	Country	Zi		Coun	itry		of Status Desired	\$8.75		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name				 ,	
609 LIVE	LTO, NEIL O OAK LANE I, FL 33327				Street Address (P.O. Box Number is Not Acceptable)					
	,				City			FL Zip Code		
	e named entity submits this statement	for the pu	rpose of changing its	s register	L ed office or regi	stered agent, or bo			and accept	
_	ations of registered agent.									
SIGNATURE	Signature, typed or printed name of registered age	ent and title if	applicable. (NO	TE: Registere	ed Agent signature req	uired when reinststing)	0	ATE		
	LE NOW!!! FEE IS \$150.00 lay 1, 2004 Fee will be \$550	0.00	9. Election Campa Trust Fund Con			\$5.00		<u> </u>	. =	
10.	OFFICERS AN	D DIREC		11.		ADDITIONS	/CHANGES TO OFFICERS			
TITLE NAME	D Delete DIPERALTO, NEIL O				E E		☐ Change ☐ Addition			
STREET ADDRESS City-St-Zip					EET ADDRESS /-ST-ZIP					
ITLE	WESTON, FL 33321		☐ Delete	TITL				☐ Change	☐ Addition	
NAME				NAM						
STREET ADDRESS City-St-Zip	,			1	EET ADORESS /-St-zip					
TITLE	<u> </u>		Delete	TITL	1			egnad2	Addition	
NAME STREET ADDRESS				NAM STRI	AE EET ADORESS					
CITY-ST-ZIP					r-st-zip					
TITLE NAME			Delete	TITL NAM				☐ Change	☐ Addition	
STREET ADDRESS	3			STR	EET ADDRESS					
CITY-ST-ZIP TITLE	 		Delete	CITY	r-ST-ZIP	····		☐ Change	☐ Addition	
NAME			LT Detere	NAM	AE			☐ Nauña	المستوب ت	
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS Y-ST-ZIP					
MILE			☐ Delete	nn				Change	☐ Addition	
vame Street address				NAN STR	ME Eet <u>a</u> ddre <u>ss</u>					
CITY-ST-ZIP			<u> </u>	-	Y-ST-ZIP				· · · · · · · · · · · · · · · · · · ·	
indicate of the co change	certify that the information supplied vid on this report or supplemental report or proporation or the receiver or trustee end, or on an attachment with an address	t is true a npowered	nd accurate and that to execute this repor other like empowered	my signa rt as requ	ature shall have	the same legal effe 607, Florida Statu	ect as if made under oath; t	hat I am an officer ears in Block 10 o	or director	
SIGNA	TURE: X JULY	D DERTEN	PANE OF SIGNING OFFICE	D OD NOE	7700	X	1/04	Cautime Phone #		