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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P38949

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AA PHYSICIANS AND DENTAL REFERRAL LINE INC.

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Principal Pia	nce of Business	Ma	illing Address			i indicate to a reset to the state of the st	en entit terri be	901 41911 WEDEL I	
5713 CORORATE WAY STE 100			1355 W. PALMETTO PARK RD. #320						
	BEACH FL 33407		eu ICA RATON FL 33486	-3303					
US			US			3. Date Incorporated or Qualif 05/22/1992		Date of Las 5/01/199	
2. Principal	Place of Business	2a.	Mailing Address			4. FEI Number		' '-	Applied For
1		26	26			65-0321725			Not Applicab
Suite, Ap	t. #, etc.		Suite, Apt. #, etc.			5, Certificate of Status Desired	ı 🗆		5 Additional
2		27							Required
City & St	ato		City & State			6. Election Campaign Financi			00 May Be
200	Country	28	Zip	Cou	unito (Trust Fund Contribution			ed to Fees
- Zip П	<u>├</u> ղ ′		ΣIÞ		riti y	This corporation has liability Florida Statutes		ble tax unde	er s. 199.032,
24	25 9. Name and Address of C	29 People	ered Agent	30	<u></u>	10. Name and Address of New			
110	SA SPITZER			·····	81 Name	10, 114110 4114 71-000 01 1151	, , , o g, , , , , , ,		
	55 W PALMETTO PARK RD			ļ	L_L				
					82 Street A	ddress (P.O. Box Number is Not Acce	iress (P.O. Box Number is Not Acceptable)		
	STE 320 Boca raton FL 33486				83		······································		
D	DOA NATON PL 33400								
					84 City		F	85 2	ip Code
offic∈ o agent. I	r registered agent, or both, in the am familiar with, and accept the	State of Florid obligations of	la. Such charige wa , Section 607.0505,	s authorized Florida Stat	d by the corpo tutes	corporation submits this statement for oration's board of directors. I hereby a	ccept the s	appointment	as registered
CICNIATUE						•			
SIGNATURÉ	Sognature Typed or purced name of register	red agent and litte	ř apptoable. (N	OTE: Registered		aquired when reinstating)	DAT	<u></u>	
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12.	Say afore. Typed or purced hains of register				d Agent signature n				
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