FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300000249 (1)

DENTAL INSURANCE CONSULTANTS, INC.

	_										
Principal Place of Business Mailing Address											
8421 S.W. 114TH ST. MIAMI FL 33156 US				8421 S.W 114TH S treet Miami FL 33156 US					DO NOT WRITE IN THIS SPACE		
								Ī	3. Date Incorporated or Qualified		
2. Principal Place of Business 2a. Mailing Address									12/23/1992		
トラフト	Blue Lago	2a. Mailing Address 5775 Blue Lagoon Dr.				Dr.	1	4. FEI Number Applied For			
Suite, Apt. 4		Suite, Apt. #, etc.						65-0383593 Not Applicable			
22 400			27	1 100					5. Certificate of Status Desired Fee Required		
City & State 23 Miami, F1.			City & State 28 Miami, Fl						6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip 24 33126	Country 25 U.S.A.		\vdash	33126	Co		U.S.A.		8. This corporation owes or has paid the current year Intangible		
24 33120	25 U.D.A.		29		30	T			Personal Property Tax due June 30. Yes You No. 10. Name and Address of New Registered Agent		
. Name and Address of Current Registered Agent							81 Name				
TIE SHUE, HENRY C											
5775 BLUE LAGOON DR Suite 400							Stre	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33126											
47167	**** 1 C VV 1 C V										
						84			FL 85 Zip Code		
11. Pursuant to	o the provisions of	Sections 607.050	02 and 60	07.1508, Florida Statu	tes, the	abov	e-name	ed corpor	ration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered		
agent. I an	e giste red agent, or n fam iliar with, and	both, in the State Laccept the Oblig	e of Floric gations of	ia. Such chan ge was , Section 607. 0505 , F	autnori Iorida S	izea b Statute	y the c s.	orporation	n's board of directors, I hereby accept the appointment as registered		
SIGNATURE											
 	Si gnat ure, typed or pricti-						ent signa	periuper enu	when relinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	CEOD	OFFICERS AN	DIREC	DELETE		3. 1 TITLE			VI Change Addition		
NAME	TIE SHUE, HI	ENRY C		L.J OLLEGE		2 NAME		C/D) Change E Rounon		
STREET ADDRESS 5775 BLUE LAGOON DR, SI			IITE 400				ADDRES	ِ Tie	Shue, Henry C.		
CITY-ST-ZIP	MIAMI FL		3,10 101	•		4 CiTY-S		~ 5 77	75.Blue Lagoon Drive #400		
TITLE	COPD			DELETE		1 THLE	21 - Z31		Change Addition		
NAME	SHAPIRO, ST	ANLEY I			2.	2 NAME			apiro, Stanley I.		
STREET ADDRESS 5775 BLUE LAGOON DR SI			ITE 400	TE 400 2.3 S			ADDRES				
CITY-ST-ZIP	MIAMI FL				2.	4 CITY-	ST-ZIP		ami, F1, 33126		
TITLE	COOD			DELETE	3.	1 TITLE			Z/D X Change Addition		
NAME	LEVINE, HOW				3.	2 NAME			vine, Howard		
STREET ADDRESS 5775 BLUE LAGOON DR, SUITE 4				3.3 STREET A			ADDRES		75 Blue Lagoon Drive #400		
CITY-ST-ZIP	MIAMI FL			▼ DELETE	_	4. CITY-	ST-ZIP	Mi	am1, F1. 391Z6		
TITLE	SD SD	OTT E		FUT DETETE	•	1 TITLE		Ş	Change X Addition		
NAME	HILINSKI, SC	UTT F AGOON DR, SU	IITE 400	1	- 1	2 NAME		Bei	rman, Marla I.		
STREET ADDRESS	MIAMI FL	NGOON DN, St	711E 4UL	j			ADDRES		775 Blue Lagoon Dr. #400		
CITY-ST-ZIP TITLE	INICAMI I L	-		DELETE		4 CITY - S 1 TITLE	11-ZIP	_	iami, Fl. 33126 Change V Addition		
NAME						2 NAME		D	_ -		
STREET ADDRESS							ADDRES	s GOI S SO	rman, Michael A. Kennedy Plaza		
CITY-ST-ZIP						4 CHTY-5			ovidence, RI 02903		
TITLE				DELETE		1 TITLE		D.,	Change XIX Addition		
NAME					6	2 NAME			linski, Scott F.		
STREET ADDRESS					63	3 STREET	ADDRES	s 50	Kennedy Plaza		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 15.

FILED

Apr 30 1998 8:00am

Secretary of State

A ADDRICON AND ADARD ARTIC DOLLE SOUND DOLLE SOUND AND AND EDDIED (1941) DESIGNATION

13. Additions/Changes to Officers and Directors in 12.

1.1. Title

D

1.2. Name

Breier, Robert G.

1.3. Street Address

1320 South Dixie Highway, Suite 830 Coral Gables, Fl. 33146

1.4. City-st-Zip Coral Gables, Fl. 3314