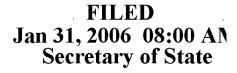
2006 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P93000029145 1. Entity Name BARRY S. SCHOLL, D.D.S., P.A. Principal Place of Business Mailing Address 815 N.W. 57TH AVENUE 9741 S.W. 147TH STREET MIAMI, FL 33176 SUITE 344







DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6. Name and Address of Current Registered Agent

No Chg-P 01272006 CR2E034 (11/05) Applied For 4. FEI Number 59-2076173 Not Applicable

\$8.75 Additional 5. Certificate of Status Desired Fee Required

SCHOLL, BARRY S 815 N.W. 57TH AVENUE

MIAMI, FL 33126

SIGNATURE: 4

DO NOT WRITE

SUITE 344 MIAMI, FL 33126			IN THIS SPACE		
	named entity submits this statement for the plans of registered agent.	urpose of changing its registere	d office or	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accep
_					
SIGNATURE_	Signature, typed or printed name of registered agent and title i	spplicable. (NOTE Registered	Agent signatur	e required when reinstating)	DATE
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS :		<u> </u>	
Title Name Street address City-St-Zip	PDT SCHOLL, BARRY S 9741 S.W. 147TH STREET MIAMI, FL 33176				1100000409342 02/08/06-80096-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOLL, ROSALIE E 9741 S.W. 147TH STREET MIAMI, FL 33176				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE
name Street address City-St-Zip	<u></u>			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
12. I hereby condicated of the corp changed.	certify that the information supplied with this fill on this report or supplemental report is true a poration or the receiver or trustee empowers or on an attachment with an add assessing all	ing does not qualify for the exer of accurate and that my signatu to execute this report as require other like empowered.	mptions course shall have depth by Chap	ntained in Chapter 11! ve the same legal effer ter 607, Florida Statute	9. Florida Statutes. I further certify that the information of as if made under oath, that I am an officer or director es; and that my name appears in Block 10 or Block 11 if