PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT	#
1. Corporation Name	

P93000034559 (3)

R.M.C., D.M.D., P.A.

Principal Place of	of Business	Mailing Address				H OOKO PAKI O	NOT BOILD ATTOM (DIT JOUR
5012-310 BLVD.		5012-301 BLVD. E.					
STE. 3		STE. 3			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	T	
Bradenton FL 34203 US		BRADENTON FL 34203 US	Bradenton FL 34203 US		 Date Incorporated or Qualified 05/13/1993 	3a, Date of Last Report 05/01/1995	
2. Principal Plac	on of Business	2a. Mailing Address			4. FEI Number	h	Applied For
21	GE O: Dasiliess	26			65-0410622		Not Applicable
Suite, Apt #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing		\$5.00 May Be
23		28	·-•		Trust Fund Contribution		Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for i	ntangible ta Yes	x under \$. 199 032 No
24	25	29	30		10. Name and Address of New Re		
	9. Name and Address of Cu	rrent Registered Agent		81 Name	10. Haine and Address of New Me	g	
CAR	RTER, RANDALL M						
5012	2 - 301 BLVD E			82 Street Add	lress (P.O. Box Number is Not Acceptab	ile)	
	TE THREE			83			
BRA	DENTON FL 34203			84 City			85 Zip Code
				1 1	poration submits this statement for the p tion's board of directors. I hereby accep	FL	
SIGNATURE 12.	Signature typed or proted can c of register OFFICER	S AND DIRECTORS	13.	d Agent signature feq.	ored when reinstaling) ADDITIONS/CHANGES TO OFFICE	CERS AND I	
TITLE	DPST	DELETE	1.1 T	ITLE		L.	Change Addition
NAME	CARTER, RANDALL M		121	IAME			
STREET ADDRESS	5012 301 BLVD E SUITE	3	135	TREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34203			CITY - ST - ZIP		_	Change Addition
TITLE		DELETE	211			L	_ change [Noshes
NAME				NAME			
STREET ADDRESS			1	STREET ADDRESS			
CITY-ST-ZIP		DELETE	31	CITY - ST - ZIP			Change Addition
TIFLE				NAME			
NAME STREET ADDRESS			33	STREET ADDRESS			
CITY-ST-ZIP			34	CiTY - ST - ZIP			
TITLE		DELETE	4.1	TITLE		L.	Change Addition
NAME			4 2	NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP		T cores		CITY - ST - ZIP			Change Addition
TITLE		DELETE		TITLE		L.	
NAME				NAME OTHER ADDRESS			
STREET ADDRESS				STREET ADDRESS			
C(TY - ST - Z(P		DELETE		CITY - ST - ZIP			Change Addition
TITLE				NAME		_	
1 NAME	i e						

6.3 STREET ADDRESS

6 4 CHTY - ST - ZIP

SIGNATURE:

STREET ADDRESS

TED NAME OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I further certify that the information individued on this annual report or supplemental 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 office or director of the opporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 in Block 13 if chapter 50 in an exact ment with an address.

7/23/96 941-739-2088

CR2E034 (3/96)