

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

FILED
Apr 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000035221 (9)**

1. Corporation Name

DENTAL VISION PRODUCTIONS, INC.



Principal Place of Business 606 BALD EAGLE DR SUITE 200 MARCO ISLAND FL 33937	Mailing Address 606 BALD EAGLE DR SUITE 200 MARCO ISLAND FL 33937
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/17/1993	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0403401		Applied For <input type="checkbox"/> Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**NEALE, PATRICK H
48 TEMPLEWOOD CT
MARCO ISLAND FL 33937**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHULZE, HERMANN J	1.2 NAME	
STREET ADDRESS	474 SPINNAKER DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL 33937	1.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHULZE, DARLENE	2.2 NAME	
STREET ADDRESS	474 SPINNAKER DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL 33937	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHULZE, RICHARD	3.2 NAME	
STREET ADDRESS	1812 PASADENA AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	METairie LA 70001	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHULZE, ELAINE	4.2 NAME	
STREET ADDRESS	8044 POIRIER PLACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	BATON ROUGE LA 70809	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHULZE, RUDY	5.2 NAME	
STREET ADDRESS	PO BOX 393 N/A	5.3 STREET ADDRESS	
CITY-ST-ZIP	GRAND COTEAU LA 70541	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FONTENOT, GRETCHEN	6.2 NAME	
STREET ADDRESS	3817 HARVARD AVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAUREL MS 39440	6.4 CITY-ST-ZIP	

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 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 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 changed, or on an attachment with an address.

SIGNATURE:



3/25/98

CR2E034 (10/97)