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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATI

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P93000073513 (2)

GREGORY M. KLYM, D.M.D., P.A.

## FILED Apr 13 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address  1001 FAST OCEAN RIVD 1001 FAST OCEAN RIVD				LUB					
1001 EAST OCEAN BLVD. STUART FL 34998			1001 EAST OCEAN BLVD. Stuart FL 34996			}			
		٠,	0,			DO NOT WRITE IN THIS SPACE			
						<ol> <li>Date Incorporated or Qualifier</li> <li>10/22/1993</li> </ol>	d		
2. Principal Pla	ace of Business	2a.	Mailing Address			4. FEI Number		A	pplied For
Suite, Apt. #, etc.		26	· · · · · · · · · · · · · · · · · · ·			65-0445028			lot Applicab
		j <sub>1</sub>	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		[27]	City & State				····		
3		28	Oily & State			6. Election Campaign Financing Trust Fund Contribution	, Lu		May Be
Zip	Country		Zip	Count	irv	8. This corporation owes or has	paid the cure		
4	25	29		30		Personal Property Tax due Ju	· -		No
	9. Name and Address of Cu		ered Agent	<del></del>		10. Name and Address of New		gent	
KLY	M, GREGORY M.			8	1 Name				
	1 EAST OCEAN BLVD.		82 Stree		2 Street Add	Address (P.O. Box Number is Not Acceptable)			
	IART FL 34996			["	- Gliaci Add	Eloss (1.0), box Humber is not Accep			
				8	3				
				8	4 City			85 Zip	Code
					O.I.,		FL	100	
11. Pursuant to	the provisions of Sections 607	.0502 and 60	7.1508, Florida St	itutes, the abo	ve-named cor	rporation submits this statement for the	e purpose of	changing	its registere
agent I an	n <b>fa</b> miliar with, and accept the d	state of Florida obligations of,	Section 607.0505	Florida Statut	oy mo corpora es.	ation's board of directors. I hereby acc	capt the appt	Jillunen a	s registereu
RIGNATURE									
SIGNATURE S	Signature typed or prefed numeral registers		applicable (			uired when reinstaling)	DATE		
GIGNATURE S	Signature typed or printed rain in of registers	d agent and title it	ngdicable (	13.	igent siçnature requ	uired when reinstating)  ADDITIONS/CHANGES TO OF			
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