FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED AND FILED

'95 MAY -1 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000042089 (0)

1. Corporate Name
TURNIER FAMILY INC.

Principal Place of Business
1378 N KILLIAN DRIVE
C/O L & J DENTAL LABORTORY
LAKE PARK FL 33403

Mailing Address
1378 N KILLIAN DRIVE
C/O L & J DENTAL LABORTORY
LAKE PARK FL 33403

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/01/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 65-0503022 — Applied For / Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
TURNIER, LLOYD J
1378 N KILLIAN DRIVE
C/O L & J DENTAL LABORTORY
LAKE PARK FL 33403

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	TURNIER, LLOYD J
STREET ADDRESS	1378 N KILLIAN DRIVE
CITY, ST, ZIP	LAKE PARK FL 33403
TITLE	D
NAME	TURNIER, JAMES L
STREET ADDRESS	1378 N KILLIAN DRIVE
CITY, ST, ZIP	LAKE PARK FL 33403
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

71 TITLE	☐ Change ☐ Addition
72 NAME	
73 STREET ADDRESS	
74 CITY, ST, ZIP	
71 TITLE	☐ Change ☐ Addition
72 NAME	
73 STREET ADDRESS	
74 CITY, ST, ZIP	
71 TITLE	☐ Change ☐ Addition
72 NAME	
73 STREET ADDRESS	
74 CITY, ST, ZIP	
71 TITLE	☐ Change ☐ Addition
72 NAME	
73 STREET ADDRESS	
74 CITY, ST, ZIP	
71 TITLE	☐ Change ☐ Addition
72 NAME	
73 STREET ADDRESS	
74 CITY, ST, ZIP	
71 TITLE	☐ Change ☐ Addition
72 NAME	
73 STREET ADDRESS	
74 CITY, ST, ZIP	

14. I 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)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and in effect 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: Lloyd J. Turnier — Lloyd J. Turnier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 — Date
407-842-0762 — Daytime Phone #

0243077 CP