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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000089757 1. Corporation Name

STEPHEN J. VELEZ, D.D.S., P.A.

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90021 001 ***150.00

) (05) (06) ((4 (D1)) B1811 48112 88111 48114 88114	28/19 18:11 18:00 8:11 :00: -00:
Principal Place of Business				
1390 CORAL RIDGE DR	Mailing Address		i gemeraat ten batet genet nafilt geliff afildt	SALVAN LINKUS KANDU BIRKIY (ADDI KADI)
CORAL SPRINGS FL 33071	1390 CORAL RIDGE DR			
US	CORAL SPRINGS FL 330 US	171		
	50		DO NOT WRITE IN THIS	SPACE
			3. Date Incorporated or Qualifed	
2. Principal Place of Business	2a. Mailing Address	·	12/12/1994	
21	26		4. FEI Number	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.		65-0541999	Not Applicable
22	27		5. Certifcate of Status Desired	\$8.75 Additional
City & State	City & State			Fee Required
23	28		6. Election Campaign Financing	\$5.00 May Be
Zip Country	Zip		Trust Fund Contribution	Added to Fees
24 25	29	Country	8. This corporation owes the current year Inta	naible
9. Name and Address of C	urrent Registered Agent	30	Personal Property Tax.	∐Yes ∏ທດ
	- Agant	81 Name	10. Name and Address of New Registered A	gent
VELEZ, STEPHEN J		81 Name		
1390 CORAL RIDGE DR		82 Street A	Address (P.O. Box Number is Not Acceptable)	
CORAL SPRINGS FL 33071			(* .o. box Number is Not Acceptable)	•
=		83		The second of the second of the second
		94 00		
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607 office or registered agent, or both, in the C	.0502 and 607.1508, Florida Statut	es, the above-named c	orporation submits this statement for the purpose of ciration's board of directors. I hereby accept the application's	<u></u>
agent. I am familiar with, and accept the ol	bligations of Section 607 0505 Fig.	uthorized by the corpor	orporation submits this statement for the purpose of cl ation's board of directors. I hereby accept the appoint	nanging its registered
SIGNATURE		rida Statutes.	, , , , , , , , , , , , , , , , , , , ,	The Autorograms
Signature, typed or printed name of registered	d agent and title if applicable. (NOTE	Registered Agent signature req	nirad who a standard	
12. OFFICERS	AND DIRECTORS	13.		. 1
TITLE D	☐ DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	
NAME VELEZ, STEPHEN J		1.2 NAME		Change Addition
STREET ADDRESS 1390 CORAL RIDGE DR		1.3 STREET ADDRESS		
CITY-ST-ZIP CORAL SPRINGS FL				
TITLE	☐ DELETE	1.4 CITY-ST-ZIP		
NAME		2.1 TITLE		Change Addition
STREET ADDRESS		2.2 NAME		J
CITY-ST-ZIP		2.3 STREET ADDRESS		
TITLE		2. 4 CITY-ST-ZIP		
NAME	☐ DELETE	3.1 TITLE		Change Addition
- '		3.2 NAME	,	J Change
STREET ADDRESS		3.3 STREET ADDRESS	• .	
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE				
AME	☐ DELETE	4.1 TITLE		
TREET ADDRESS	☐ DELETE	4.1 T/TLE		Change
/TY-ST-ZIP	☐ DELETE	4.1 TITLE 4. 2 NAME		Change Addition
ITLE	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	·	Change Addition
AME		4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Change Addition
TREET ADDRESS	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
TY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		
111-31-21		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change
πε	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
πε		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change
TLE AME	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change
TLE AME REET ADDRESS	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		Change
TLE AME	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		Change

Thereby 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 efficiency 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, with all other like empowered.

SIGNATURE:

- STEPHEN T.