SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # P94000093373,

FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State DIVISION OF CORPORATIONS

FILED
Sep 21, 1999 8:00 am
Secretary of State
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09-21-1999 90003 005 ***400.00 09-21-1999 90003 006 ***150.00

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HERIVIAN	IN J. SCHULZE, DDS, P.A.	•	<i>V</i>						
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Principal Place	of Business	Mailing Add	iress						
606 BALD EAGI			EAGLE DR. #20	X 0					
MARCO ISLAND FL 33937		MARCO ISLAND FL 33937					DO NOT WRITE	F IN THIS S	PACE
US		US					3. Date Incorporated or Qualified		
							12/28/1994		
		T = 14-91-	Address				4. FEI Number		Applied For
2. Principal Pla	ace of Business	2a. Mailing	Address				65-0558414		Not Applicable
21		26	nt # 010	4.77				$\overline{\Box}$	\$8.75 Additional
Suite, Apt. #	#, etc.		pt. #, etc.	·· -			5. Certificate of Status Desired	. بـا	Fee Required
22		27 City & 5	State				6. Election Campaign Financing		\$5.00 May Be
City & State	•	28	Jidie				Trust Fund Contribution	\sqcup	Added to Fees
23	Country	Z0 Zip		Cou	ntry	J	8. This corporation owes the curre	nt year 🚞	
Zip	25 Country	29		30	•		Intangible Personal Property.		Yes No
24	9. Name and Address of Curren		ent	1 1			10. Name and Address of New R	egistered A	gent
	g. Name and Address S. St. S.				81	Name			
	BSTER, RONALD S				82	Stract Addre	ess (P.O. Box Number is Not Acceptate	ble)	<u> </u>
ROY	'AL PALM MALL				02	Stieer Work	sss (r.O. Dox Hamber to rect 1994)		
	N. COLLIER BLVD.				83				
MAR	RCO ISLAND FL 33937								85 Zip Code
						City		FL	
44 5	to the provisions of sections 607.050	22 and 607 1508	Florido Statute	43 3-		amod cornor	estion submits this statement for the Du	rpose of cha	inging its registered
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office or r	registered agent, or both, in the State	e of Florida. Such	rionda Statute 1 change was a	es, the ab authorized arida Stat	ove-na d by th	he corporation	on's board of directors. I hereby accep	t the appoin	tment as registered
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such gations of, section	change was a 607.0505, Flo	es, the ab authorize orida Stat	ove-na d by th tutes.	he corporation	ration submits this statement for the pu on's board of directors. I hereby accep	t the appoin	tment as registered
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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 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 indicated on this annual report 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:

941 394 1004