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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # **P**9

DOCUMENT # P9500001261 (3)

THE TOOTH BUILDERS, INC.

25

Principal Place of Business 13170-80 ATLANTIC BLVD JACKSONVILLE FL 32225

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

24

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

28

29

9. Name and Address of Current Registered Agent

13170-60 ATLANTIC BLVD JACKSONVILLE FL 32225-4151

## FILED Apr 08 1997 8:00am Secretary of State



Yes No

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

3a. Date of Last Report

03/28/1996

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

0097035

Not Applicable

3. Date Incorporated or Qualified

01/04/1995

59-3292102

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

4. FEI Number

JACKSONMILE FL 32225  83  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 agent, or hoth, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and formation with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signator by the productioned depote and obtain applicable.  OF LICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE BOUDT, PAUL R  13.170-60 ATLANTIC BLVD  JACKSONMILE FL 32225  14.6(1Y-S1-7IP)  DELETE  21.7(1)LE  Change Addition  DELETE  31.7(1)LE  Change Addition  Addition  SIRELLAURIESS  GIY S1-7P  10.1  DELETE  32. NAME  32. NAME  32. NAME  32. NAME  33. SIRELLAURIESS  GIY S1-7P  10.1  DELETE  33. SIRELAURIESS  GIY S1-7P  10.1  DELETE  34. CITY S1-7P  10.1  DELETE  41. TITLE  Change Addition  Change Addition  Addition  Change Addition  Addition  Addition  ADDITIONS/CHANGES TO CHANGE IN 12.  Change Addition  Addition  Change Addition  ADDITIONS/CHANGES TO CHANGE IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	BOLDT, PAUL R 13170-80 ATLANTIC BLVD JACKSONVILLE FL 32225			81	81 Name  82 Street Address (P.O. Box Number is Not Acceptable)			
### City ### B5 Zip Code  11. Fursional to the provisions of Sections 607,0502 and 607,1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered rather or expect creating agent, or both, or the State of Encode Statutes who are authorities by the corporation's board of directors. I hereby accept the displanter of, Section 607,0505, Brieflord Statutes.  SIGNATURE  12. OF INCERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. THE DELETE IN THE Change Agent signature required when receasing DMT.  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. THE DELETE IN THE Change Addition Statutes ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. THE Change Addition Change Addition Change Agent signature required when receasing DMT.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. THE Change Addition Change Addition Change Agent signature required when receasing DMT.  19. THE Change Addition Change Addition Change Agent signature required when receasing DMT.  19. THE Change Addition Change Addition Change Agent signature required when receasing DMT.  19. THE Change Addition Change Addition Change Agent signature required when receasing DMT.  19. THE Change Addition Change Addition Change Agent Agent agent signature required when receasing DMT.  19. THE Change Addition Change Addition Change Agent A				82				
11. Fursional to the provisions of Sections 637.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Or holf, in this State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent for the purpose of changing its registered agent. Or holf, in this State of Florida Statutes.  SIGNATURE  12. OF LICETES AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  11. THE  12. OF LICETES AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. THE STATE ADDRESS IN 12. THE Change Addition State Addition In 12. NAME.  13. STATE ADDRESS IN 12. THE Change Addition IN 12. NAME.  13. THE STATE ADDRESS IN 12. THE Change Addition IN 12. NAME.  13. STATE ADDRESS IN 12. THE Change Addition IN 12. NAME.  13. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. Change Addition IN 12. THE Change Addition IN 12. NAME.  13. NAME  14. NAME  14. NAME  15. NAME  15. NAME  15. NAME  16. NAME  16. NAME  16. NAME  16. NAME  16. NAME  17. NAME  18.		·····		83				
SIGNATURE				84	City	FL	85 Zır	o Code
12.	11. Pursuant to office or reagent. Far	o the provisions of Sections 607.0502 and 607.1 sgistered agent, or both, in the State of Florida 5 u familiar with, and accept the obligations of, Se	508, Florida Statutes Such change was au ection 607.0505, Flor	s, the above uthorized by ida Statutes	named the corp	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the app	changing ointment a	its registered us registered
12.		Super we travel or protest name of resistence agent and title it app	olicable (NOTE	Registered Age	ni signature	required when reinstaling) DATE		
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2 4 CITY-ST-ZIP	NAME			2.2 NAME				
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NAME	CITY-S1-ZiP			2 4 CiTY-	\$T - ZIP			
STREET ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZIP	THE		DELETE	3.1 TITLE	·		Change	Addition
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