

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000008191 (5)

1. Corporation Name

EDUARDO R. NORTHLAND, D.D.S., P.A.



Principal Place of Business

2825-2827 CORAL WAY  
MIAMI FL 33145

Mailing Address

2825-2827 CORAL WAY  
MIAMI FL 33145

3. Date Incorporated or Qualified  
01/31/1995

3a. Date of Last Report  
N/A

2. Principal Place of Business

21 2825 S.W. 22nd ST.  
Suite, Apt. #, etc.

2a. Mailing Address

26 2825 S.W. 22nd ST.  
Suite, Apt. #, etc.

4. FEI Number

65-0554118

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

City & State

23 MIAMI, FL.

City & State

28 MIAMI, FL.

Zip

24 33145-3203

Country

25 DADE

Zip

29 33145-3203

Country

30 DADE

9. Name and Address of Current Registered Agent

BRITO, LEONARDO F  
2600 S.W. 3RD AVE.  
SUITE 301  
MIAMI FL 33129

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

Signature, typed or printed name of registered agent

(NOTE: Registered Agent signature required when re-registering)

Date

OFFICERS AND DIRECTORS

DELETE

TITLE

D  
NORTHLAND, EDUARDO R  
1925 BRICKELL AVE. C-906  
MIAMI FL 33129

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

D  
NORTHLAND, EDUARDO R.  Change  Addition  
2825 S.W. 22nd STREET  
MIAMI, FL. 33145-3203

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Change  Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Change  Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Change  Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Change  Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change  Addition

14. I do 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)(k), 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 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 changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96  
Date

305-448-1172  
Daytime Phone #

CR2E034 (12/95)