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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000011374 (2)

1. Corporation Name

PAUL THE DENT MAN, INC.



Principal Place of Business

755 NORTHWEST 84TH LANE
CORAL SPRINGS FL 33071

Mailing Address

755 NORTHWEST 84TH LANE
CORAL SPRINGS FL 33071

3. Date Incorporated or Qualified

02/08/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

O'MALLEY, ANDREW M
100 SOUTH ASHLEY DRIVE STE. 1190
TAMPA FL 33602

81 Name

ANTHONY L. PARETTA JR

82 Street Address (P.O. Box Number is Not Acceptable)

755 NW 84th Lane

83

CORAL

84 City

CORAL SPRINGS

FL

85 Zip Code

33371

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

Anthony L. Paretti Jr

ANTHONY L. PARETTA JR

4/24/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME PARETTA, PAUL W
STREET ADDRESS 101 SOUTH OLD COACHMAN ROAD APT. 511
CITY-ST-ZIP CLEARWATER FL 34625

1.1 TITLE PRESIDENT
1.2 NAME PARETTA, PAUL W.
1.3 STREET ADDRESS 101 SOUTH OLD COACHMAN ROAD APT 511
1.4 CITY-ST-ZIP CLEARWATER, FL 34625

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE TREASURER
2.2 NAME PARETTA, Anthony L.
2.3 STREET ADDRESS 755 NW 84th Lane
2.4 CITY-ST-ZIP CORAL SPRINGS, FL 33371-7125

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 if changed, or on an attachment with an address.

SIGNATURE:

Anthony L. Paretti Jr

4/24/96

954 712-413

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)