

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000036328 (9)

1. Corporation Name

CHI T. NGUYEN, D.D.S., P.A.



Principal Place of Business

Mailing Address

541 EAST PARK DRIVE  
LARGO FL 34641

541 EAST PARK DRIVE  
LARGO FL 34641

11 Seventh Ave NE  
Ruskin, FL 33570

SAM 2

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/08/1995

3a. Date of Last Report

04/23/1996

4. FEI Number

59-3318766

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 11-7th AVE. N.E.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

Ruskin, FL

28 City & State

Ruskin, FL

24 Zip

33570

25 Country

U.S.A.

29 Zip

30 Country

U.S.A.

9. Name and Address of Current Registered Agent

O'CONNOR, PATRICK M  
18167 U.S. HIGHWAY 19 NORTH  
SUITE 481  
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81 Name

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

600002264526--5

83

-08/12/97--01047--011

84 City

\*\*\*\*165.00 \*\*\*\*165.00

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME NGUYEN, CHI T  
STREET ADDRESS 541 EAST PARK DRIVE  
CITY-ST-ZIP LARGO FL 34641

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 D ☒ Change ☐ Addition

1.2 NAME Nguyen, Chi T.  
1.3 STREET ADDRESS 11-7th Ave. N.E.  
1.4 CITY-ST-ZIP Ruskin, FL 33570

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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.

CR2E034 (4/97)



## *A Family Dentist*

CHRISTINE FERRIER, D.D.S.  
CHI T. NGUYEN, D.D.S.

11 SEVENTH AVE., N.E.  
RUSKIN, FL 33570  
TELEPHONE: (813) 645-4611

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July 28, 1997

Division of Corporations  
Annual Reports Section  
P. O. Box 1500  
Tallahassee, FL 322302-1500

To Whom this may concern:

I just received a second notice for filling my annual corporation report for 1997. I did not received the first notice and was not aware of the past filling date until I received this notice.

Within the past year, I have purchased an office in Ruskin and also moved my family from the city of Largo to Seffner. For some reason, I did not received the first notice...possibly due to changes of addresses or was lost in the mail. I apologized for not refilling this report on timely manner due to the reasons that I stated above. I hope that this will not cause any inconvenience to your office in the future.

I am writing to request that the penalty be waived. This is a very heavy penalty on my office financially, since we have just opened and currently are struggling. Please consider my request and grant me this waiver.

Enclosed is a check for \$165.00 for the annual corporation report renewal. Your consideration in this matter is greatly appreciated. Thank you for your time. If I can be of further assistance, please contact me at the above address and phone number.

Respectfully,

Chi T. Nguyen, DDS, PA