ALLE LIFTER AT I 13 www **FILED PROFIT** FLORIDA DEPARTMEN STATE CORPORATION Sandra B. Mor **ANNUAL REPORT** May 07 1997 8:00am Secretary of St 1997 DIVISION OF CORPO TIONS Secretary of State DOCUMENT # P95000076085 (6) RICHARD G. KANTWILL, D.D.S., P.A. Principal Place of Business Mailing Address 727 CORTARO DRIVE 727 CORTARO DRIVE RUSKIN FL 33573 RUSKIN FL 33573-6812 3. Date Incorporated or Qualified 3a. Date of Last Report 10/03/1995 08/20/1996 2. Principal Place of Business 4. FEI Number 2s. Mailing Address Applied For 59-3340410 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SILBERSTEIN, DAVID M Name 720 SOUTH ORANGE AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 83 84 City Zip Code 85 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. Thereby 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change Addition 1.1 TOUR KANTWILL, RICHARD NAME 1.2 NAME 727 CORTARO DRIVE STREET ADDRESS 1.3 STREET ADDRESS RUSKIN FL 33573 CITY-ST-ZIP 1.4 CHY-ST-ZIP DELETE TITLE 2.1 TULE Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 240 TY - ST - 7IP DELETE TITLE 311 Change Addition NAME 32 STREET ADDRESS 3 3 SIREET ADDRESS CITY-ST-ZIP DELETE Change Addition 4.1 NAME STREET ADDRESS REET ADDRESS CITY-ST-ZIP Y - ST - ZIP DELETE TITLE 5.1 Addition NAME STREET ADDRESS 5.3 REET ADDRESS CITY-ST-ZIP Y - ST - ZIP DELETE TITLE 5.1 Change Addition NAME STREET ADDRESS IEET ADDRESS 6.3 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and I am an officer or director of the corporation or the receiver or trustee empowered to appears in Block 12 or Block 13 in granged, or in all attrobment with an address. exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

ccurate and that my signature shall have the same legal effect as if made under oath; that kecule this report as required by Chapter 607, Florida Statutes; and that my name