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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

14. I hereby certify that the indicated on this annofficer or director of the Block 12 or Block 13

P95000077310 (7)

DENTONE, INC.

FILED Apr 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							## ## ##	1000 10000 IIIO)	HABIT MAIL (AN)	
9373 W. SAMPLE RD.		9373 W. SAMPLE RD.								
SUITE #205 CORAL SPRINGS FL 33065		SUITE #205				DO NOT WRITE IN THIS SPACE				
COMAL SPI	NINGS PL 33003	CORAL SPRINGS PL	CORAL SPRINGS FL 33065			3. Date Incorporated or Qualified				
						10/09/1995				
2. Principal P	face of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For				1
21		26				65:0618198			ot Applicable]
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desire	ed 🔲		Additional equired	
City & State		City & State				Election Campaign Finance Trust Fund Contribution				
Zip	Country	Zip	·			8. This corporation owes or	nas paid the c			1
24	25	29	30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of Current	2.1		10. Name and Address of N	ew Registered	d Agent]		
1	ipkin, sheldon		Į	81 Na	me					
2020 NE 163 STREET				82 St	eel Addre	ss (P.O. Box Number is Not Ac	ceptable)			1
1	:Uite 300 Iorth Miami Beach Fl 33162			83					-	┨
"	OTTO MIAMI DENOTT E GOTOE					······································				1
				84 Ci	У		FI	85 Zip (Code	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author				pove-nai	ned corpo	oration submits this statement for	r the purpose	of changing it	s registered	1
agent. La	m fami liar with, and accept the obliga	di riondal Such change was dions of, Section 607,0505, I	S authorized Florida Stat	utes.	corporation	on's board of directors, i nereby	accept the at	pomiment as	registered	ĺ
SIGNATURE										
12.	Signature, typed or printed name of registered age: OFFICERS AND		O1E Registered	Agent sig	en-cper ands	d when reinstating) ADDITIONS/CHANGES TO	DATE OFFICERS AN	ID DIPECTOE	29 IN 12	18
TITLE	P	☐ DELETE	1.1 70	LE	P	7,00111010101111100010	OTTTOLING FI	Change	Addition	10/01
NAME	MATWICK, DENNIS		1.2 NA	ME	Na	twick Dennie	ς			7
STREET ADDRESS 5517 SOUTHWEST EIGHTH PLACE			1.3 ST	REET ADDR	ESS 55	twick, Dennie	4D Plac	e		1
CITY-ST-ZIP	MARGATE FL 33168		1.4 CF	Y-ST-ZIP	Mo	irgate, F1. 331	68			3
TITLE	S	DELETE	2 1 TI		5	4.1.7.		Change	☐ Addition	C
NAME	MATWICK, DENNIS	N 10F	2.2 NA		Ng	twick, Dennis 17 Southwest 8	oth place	~=		
STREET ADDRESS	5517 SOUTHWEST EIGHTH	PLACE	1	REET ADDR		11 Southwest a	TUP PIUC	شد		1
Crty-St-ZiP Title	MARGATE FL 33168	T or tre	0.7717	TY - ST - ZIP		argate, F1. 33	168	Change	Addition	┨
NAME	\sim	t				st name be		em Aumillo		
STREET ADDRESS	Please	· note-	1100	4	100	+ -				
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TITLE	- On lin	es #12	-	^^	ا ا	1		Change	Addition	1
NAME			١	\mathcal{L}	ZIQ	be				l
STREET ADDRESS	111	wick								İ
CITY-ST-ZIP	- Nob	MICK								
TITLE	···· 1 V U I I	VV (C. K.						Change	Addition	
NAME										Ì
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CITY-ST-ZIP	NINT								1.100	1
TITLE	MOI							☐ Change	L. Addition	ļ
NAME		1								
STREET ADDRESS CITY-ST-ZIP Matwick										
CITY-ST-ZIP		$VV \mid \subseteq \{ \subset \}$								

ites. I further certify that the informatiot as if made under oath; that I am an utes; and that my name appears in

HETH CAN COCHTEE O