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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000079915 (1)

DENTEL MARKETING, INC.

8971 WEST BAY HARBOR DRIVE #107 9971 WEST BAY HARBOR DRIVE #107 BAY HARBOR ISLAND FL 33154 BAY HARBOR ISLAND FL 33154-1553	
3. Date Incorporated or Qui 10/18/1995	alified 3a. Date of Last Report 07/17/1996
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 26 65-0614898	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desi	ired Sa.75 Additional Fee Required
22 27 City & State City & State 6. Election Campaign Finance	
23 28 Trust Fund Contribution	ncing \$5.00 May Be Added to Fees
	ility for intangible tax under s. 199.032,
24 25 29 30 Florida Statutes	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of N	New Registered Agent
PHILLIPS, CHARLES D 81 Name	1
9971 WEST BAY HARBOR DRIVE #107 82 Street Address (P.O. Box Number is Not Ad	cceptable
BAY HARBOR ISLAND FL 33154	,,
83	
84 City	85 Zip Code
11 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above named composition submits this statement f	• -
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 	by accept the appointment as registered
SIGNATURE Signature: Typestor protection is of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)	DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTORS IN 12
TITLE PD DELETE 11 TITLE	☐ Change ☐ Addition
NAME PHILLIPS, CHARLES D 12 NAME	
STREET ADDRESS 9971 WEST BAY HARBOR DRIVE #107 1.3 STREET ADDRESS	
CITY-SI-ZIP BAY HARBOR ISLAND FL 33154 14 CITY-SI-ZIP	, and the second se
TITLE DELETE 21 TITLE	Change Addition
NAME 22 NAME	
STREET ADDRESS 23 STREET ADDRESS	
CITY-S1-7/P 2 4 CITY-ST-ZIP	
THE DELETE 31 TITLE	Change Addition
NAME 32 NAME	•
STREET ADDRESS 33 STREET ADDRESS	
CITY_S1-7IF	☐ Change ☐ Addition
NAME 4 2 NAME	Em cuange Em radition
STREET ADDRESS 43 STREET ADDRESS	
CITY-SI-76* 44 CITY-SI-2IP	
THE DELETE STITUE	Change Addition
NAME 52 NAME	
STREET ADDRESS 53 STREET ADDRESS	
CITY-ST-ZIP 54 CITY-ST-ZIP	
TITLE DELETE 61 TITLE	☐ Change ☐ Addition
NAME 62 NAME	<u> </u>
STHEET ADDRESS 63 STREET ADDRESS	
017Y-S1-7IP 64 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-97

305.895.0714

Daytime Phone

FILED

Jan 29 1997 8:00am

Secretary of State