NS BEFORE COMPLETING THIS FORM.

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCU	JMENT	Г#	P9500	00907	791		
STEVE	EN MICH	HAEL V	VIEDER,	DMD, PA	4		
3925 SWIF SARASOTA	A FL 34231		Mailing Address 3925 SWIFT ROAD SARASOTA FL 34231				
	ncipal Office		ough incorrect information and e 3. New Mailing Office Addre				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					
City & Stat	e			City & State			
Zip		Country		Zìp		C	
7. Names	and Street Ad	idresses of E	ach Officer and	d/or Director (F	lorida nonpro	ofit co	
Title(s)	2		e of Officers or Directors		3		
PVST	WEIDER, STEVEN M				. 5757 8 14 7	ENE	

If above a	ddresses are incorrect in any way, line	through incorrect i	information and enter correction below.				
			ling Office Address, If Applicable	Date Incorporate To Do Busin	Date Incorporated or Qualified To Do Business in Florida 01/02/1996		
		Suite, Apt. #	Suite, Apt. #, etc.		5. FEI Number Applied		
		City & State			65-0634333 Not		
Zip	Country	Zìp	Country	6. CERTIFICATE		Additional Fee required a Certificate of Status	
7. Names	and Street Addresses of Each Officer a	nd/or Director (Fl	orida nonprofit corporations must list at	least 3 directors)			
Title(s)	Name of Officers		Street Address of Ea Officer and/or Direct		City / State / Zip		
PVST	WEIDER, STEVEN M		5757 BENEVA ROAD SOUTH 1475 John Ring	ling Pky	SARASOTA FL Sarasota, F	L 34236	
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					Burn		
	8. Name and Address of Curre	nt Registered Ag	gent	Name and Address of New Registered Agent			
		_	Name				
	/ETT, DANIEL L BENEVA RD S.		Street Address (P.O. Box Number is Not Acceptable)				
	SOTA FL 34233		Suite, Apt. #, E	Suite, Apt. #, Etc.			
			City		FL	Zip Code	
10. I, being			poration, am familiar with and accept the	obligations of Sect	ion 607.0505, F.S.		
Signature o Registered	Agent			}	Date		
		REGISTERED A	GENT MUST SIGN				

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER



P95000090791

5777 Beneva Rd. South Sarasota, Fl 34233 (941) 923-0964 FAX (941) 925-4874 <-> NY Satellite Office (518) 869-2334

November 6, 2000

Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327

Re: Steven Michael Wieder, DMD, PA

Dear Sir or Madam:

Enclosed please find copies all of the documentation I have pertaining to the dissolution of the above-referenced corporation. As per your telephone instructions, I have determined that the original check sent to you has not cleared. I am enclosing another check in the amount of \$150.00 for this reinstatement. If you have any questions or concerns, please do not hesitate to call me at (941) 929-9662.

Pending your reply, I remain,

Sincerely,

Susan M. O'Brien, CLA

Enclosures

P950000 90791

08/15/00

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL '32302-1500

Re: Steven Michael Wieder, DMD, PA and True Form, Inc.

Gentlemen:

Please be advised that I have had over 10 businesses state that they have never received their first notice of renewal for the 2000 Uniform Business Report. This large number of lost reports could be the result of a lost mailing, Department of State computer error or some other problem.

Please find enclosed two renewals that I respectfully request an abatement of the late filing penalties. The renewal for Steven Michael Wieder, DMD, PA has never been late. Dr. Wieder is highly detail oriented and would never miss a timely renewal. The second renewal is for True Form, Inc. they also state that they never received the first notice.

Enclosed are two checks in the amount of \$150.00 for the two separate renewals listed above. If you need any additional information, please contact me.

Sincerely,

Daniel L. Prewett, Ph.D.

DLP/kah

Enclosure