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 # P95000096810 (3)

FILED Feb 13 1998 8:00am Secretary of State

MANU	EL G. LOPEZ D.D.S. P	P.A.	()						
Principal Place of Business Mailing Address						- I SOUTHERN THE TOTAL BILLY BRITS BOTH WHITE WITH	Bridi idiat (18	II 0111 (P 81	
4040 A S.W.		4040 A S.W.							
SOUTH MIAMI FL 33155 SOUTH MIAMI FL 33155						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	NOL		
1						12/22/1995			
2. Principal F	Place of Business	2s. Mailing Ac	idress			4. FEI Number	Ap	plied For	
21	21		26			65-0632019		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	dditional	
22		[27]				5. Certificate of Status Desired	Fee Re	quired	
City & Star	te	City & Stat	le			6. Election Campaign Financing	\$5.00		
23		28		Ö		Trust Fund Contribution	Added t		
Zip	Country	Zip	├ ──	Country		8. This corporation owes or has paid the curre		angible No	
24	25 25 Name and Address of	29 Current Registered Agen	30			Personal Property Tax due June 30. 10. Name and Address of New Registered A		3 NO	
CI	RUZ, ALEJANDRINA G			81	Name				
	00 NW LEJEUNE RD.								
	JITE 427			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	IAMI FL 33126			83					
				اجرا	000		leel Zin C		
				84	City	FL	85 Zip C		
11. Pursuant	to the provisions of Sections 6	07.0502 and 607.1508, Fig	orida Statutes, th	he above	-named corpo	oration submits this statement for the purpose of con's board of directors. I hereby accept the appoint	changing its	s registered	
agent La	regisiered agent, or both, in in am familiar with, and accept the	e obligations of, Section 60	07.0505, Florida	Statutes	the corporation	on's board of directors, I hereby accept the appoint	mment as	registered	
SIGNATURE									
	Signature, typicd or printed hame of regis				nt signature require	d when reinstaling) DATE	DIRECTOR	0/11/40	
12.	D	RS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND	Change	S IN 12 Addition	
NAME	LOPEZ, MANUEL G		1	1.2 NAME		•			
STREET ADDRESS	4040A SW 57TH AVE			1.3 STREET	ADDRESS				
CITY-ST-ZIP	SOUTH MIAMI FL 3312	NO.	10	1.5 Office 1	ADDISCOO				
TITLE		מי		14 CITY, ST	1. 7IP				
	l .			1.4 CITY - ST 2.1 TITLE	r-ZIP		Change	Addition	
NAME			DELETE	1.4 CITY-ST 2.1 TITLE 22 NAME	r-zip		Change	Addition	
NAME Street address			DELETE	2.1 TITLE			Change	Addition	
			DELETE :	2.1 TITLE 2.2 NAME	ADDRESS		Change	Addition	
STREET ADDRESS			DELETE	2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS		Change	Addition Addition	
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14. I 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 arrural 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 thistee 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 allustripet with an address.

Manuel G. Lopez, DDS