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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000097651 (0)
1. Corporation Name

WILLIAM H. BLANCH, D.D.S., P.A.

Prior	inal.	Place of I	Rucinace



Principal Place of Business 10717 SW 104 STREET MIAMI FL 33176		10717 SW 104	Mailing Address 10717 SW 104 STREET MIAMI FL 33176						
		··			3. Date Incorporated or Qualified 12/19/1995	3a. Date	of Last F	Report	
2. Principal Place of Business		2a. Mailing Addr	28. Mailing Address Box 560942		4. FEI Number		Applied For		
Suite, Apt.	#, etc.	Suite, Apt. #.	, , , , , , , , , , , , , , , , , , ,	377 -	65-0637892		60.7	Not Applicable	
22		27	▶ -¬		5. Cert ficate of Status Desired	3 1		75 Additional ee Required	
City & State	9	City & State	mi H		6. Election Campaign Financing			00 May Be	
23 Zip	Country	28 MI A	• •		Trust Fund Contribution		Adde	ed to Fees	
24	Country 25	29 3325L	- 6443 20	DADE	8. Trus corporation has liability for in Floridu Statutes Yes		under s	199.032,	
	9. Name and Address of Curre		07 : 250	Unite	10. Name and Address of New Ri		gent		
				81 Name		ogistered A	Acur		
	IATO, NAT			82 Street Addre	ss (P.O. Box Number is Not Acceptable				
10717 SW 104 STREET			82 Street Addi			e;			
Miami Fl	L 331/6			83					
			}	84 City		··	85 Zi	ıp Code	
11 Pursuant t	to the provisions of Sections 607.050	V 201 607 1509 55 23	Challate also			<u>FL</u>	1 1	•	
				re named corpora: Prporation's board	tion submits this statement for the purp Lof directors. Thereby accept the appo	ose of chan intrient as re	ging its i egistered	registered office diagent. Lam	
real miles (4)	th, and accept the obligations of, Sec	Jach 607.0505, Floriga 8	Statutes					Ü	
SIGNATURE _	Signature based or pointed manual registered again	stacito tappilale	Carolla Bear Social	Mertsgrafan naanta	or in all others	DĀ* I			
12.		ND DISECTORS	13.		ADDITIONS/CHANGES TO OFFIC		OIRE CTC	DRS IN 12	
TITLE	D AND AND AND AND AND AND AND AND AND AN	DELE	ETE 1 TIT	r£			Change	Add tion	
NAME	BLANCH, WILLIAM H					<u> </u>			
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oath, that I am an officer or director of this corporation or the receiver or trusted employeed to execute this report as required by Chipter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, er on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 25, 8996 951-7679