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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000097835

RITA ECHEVARRIA, D.D.S., P.A.

Principal Place	of Business	Ma	iling Address						,				•
7171 CORAL W		717	1 CORAL WAY										
SUITE 217			SUITE 217						NOT WIDE	C IN THIS	CDACE		
MIAMI FL 33155			MIAMI FL 33155				<u> </u>	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed					
US		US					12/2	28/1995	or Qualifed				
2. Principal Pl	ace of Business	2a.	Mailing Address				4. FEIN						ed For
21		26					65-0)375587			<u></u>		pplicable
Suite, Apt. i	#, etc.	27	Suite, Apt. #, etc.				5. Certif	cate of Status	Desired		• -	5 Add Requ	ditional iired
City & State	9		City & State				6. Electi	ion Campaign	Financing		\$5.0	00 м	ay Be
23		28					Trust	Fund Contrib	ution		Add	ed to l	Fees
Zip	Country		Zip	Col	untry		8. This	corporation ov	ves the curr	ent year int		<i>:</i>	.
24	25	29		30				onal Property			✓ Yes	<u>L</u>]No
1	9. Name and Address of Curre	ent Regis	tered Agent]		10. Nam	e and Addres	s of New F	egistered	Agent		
					81	Name	r						
	CO, EDUARDO I				82	Street A	Address (P.O. Be	ox Number is	Not Accepta	ble)	_		
i e	S N.E. 191 STREET						<u> </u>						
	E 500				83							•	
AVE	NTURA FL 33180				84	City					85 2	ip Co	de
					1 1	í .				<u>FL</u>	.		
	to the provisions of Sections 607.05 egistered agent, or both, in the Stat					e-named o	corporation subr oration's board o	nits this stater f directors. I h	nent for the ereby accer	purpose of t the appoi	changing ntment a	jits re s regis	stered
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6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

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 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 of 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, with all other like empowered.