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Feb 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P96000035482 (4)
 1. Corporation Name
ENRIQUE BARRETO, D.M.D., P.A.



Principal Place of Business: **C/O KT&S REGISTERED AGENT CORPORATION, 100 S.E. 2ND ST., 28TH FLOOR, MIAMI FL 33131**

Mailing Address: **C/O KT&S REGISTERED AGENT CORPORATION, 100 S.E. 2ND ST., 28TH FLOOR, MIAMI FL 33131-2100**

3. Date Incorporated or Qualified: **04/23/1996**

3a. Date of Last Report

2. Principal Place of Business: **E. BARRETO, D.M.D., P.A., 8740 N. Kendall Dr. #214, MIAMI, FL 33176**

2a. Mailing Address: **E. BARRETO, D.M.D., P.A., 8740 N. Kendall Dr. #214, MIAMI, FL 33176**

21. City & State: **MIAMI, FL**

22. Zip: **33176**

23. Country: **USA**

FEI Number: **05-0663950**

Applied For: Applied For Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing: **\$5.00 May Be Added to Fees**

7. Total Fund Contribution:

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
KT&S REGISTERED AGENT CORPORATION, 100 S.E. 2ND ST., 28TH FLOOR, MIAMI FL 33131

10. Name and Address of New Registered Agent

81. Name: **ENRIQUE BARRETO D.M.D., P.A.**

82. Street Address (P.O. Box Number is Not Acceptable): **E. BARRETO, D.M.D., P.A., 8740 N. Kendall Dr. #214**

83. City: **MIAMI, FL**

84. Zip Code: **33176**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: _____

12. OFFICERS AND DIRECTORS

TITLE: **Director** DELETE

NAME: **Enrique Barreto DMD**

STREET ADDRESS: **8740 N. Kendall Drive**

CITY-ST-ZIP: **Miami, FL 33176**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE: Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE: Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE: Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE: Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE: Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

CP2E034 (9/96)