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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**FILED****May 15 1998 8:00am**
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra S. Northing Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>P96000067019</i> 1. Corporation Name <i>DEFAUSA LOYA DENTAL STUDIO INC.</i>			
Principal Place of Business <i>14372 BLACKBURN DRIVE</i> <i>WELLINGTON FL 33414-8440</i>		Mailing Address 	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		24. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip Country	
3. Date Incorporated or Qualified <i>8/9/96</i>		4. FBI Number <i>65-0694839</i>	
5. Certificate of Status Desired ☐		Applied For Not Applicable	
6. Election Campaign Financing Trust Fund Contribution ☐		\$8.75 Additional Fee Required \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No			
8. Name and Address of Current Registered Agent <i>LOYA, Audrey I</i> <i>14372 BLACKBURN DRIVE</i> <i>WELLINGTON FL 33414</i>		9. Name and Address of New Registered Agent 91 Name 92 Street Address (P.O. Box Number is Not Acceptable) 93 94 City 95 FL 96 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and use if applicable. (NOTE: Registered Agent signature required when resigning.) DATE			
12. OFFICERS AND DIRECTORS 12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP ☐ DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP ☐ Change ☐ Addition	
12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP ☐ DELETE		13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP ☐ Change ☐ Addition	
12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP ☐ DELETE		13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP ☐ Change ☐ Addition	
12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP ☐ DELETE		13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP ☐ Change ☐ Addition	
12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP ☐ DELETE		13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP ☐ Change ☐ Addition	
12.1 TITLE 12.2 NAME 12.3 STREET ADDRESS 12.4 CITY - ST - ZIP ☐ DELETE		13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP ☐ Change ☐ Addition	

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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