

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000069550

1. Corporation Name
YGLESIAS DENTAL SERVICE, INC.

Principal Place of Business

2246 NW 3 STREET
MIAMI FL 33125

Mailing Address

256 NW 42 AVE
MIAMI FL 33126
US

FILED
Mar 30, 1999 8:00 am
Secretary of State

03-30-1999 90008 028 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/21/1996

4. FEI Number

65-0688343

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

YGLESIAS, EDUARDO M
2246 NW 3 STREET
MIAMI FL 33125

10. Name and Address of New Registered Agent

81 Name EDUARDO M. YGLESIA

82 Street Address (P.O. Box Number is Not Acceptable)
1066 S.W. 122 PLACE

83

84 City MIAMI FL 85 Zip Code 33184

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Registered Agent - Eduardo Yglesias

12. OFFICERS AND DIRECTORS

TITLE PSD
NAME YGLESIA, EDUARDO M
STREET ADDRESS 2246 NW 3 STREET
CITY-ST-ZIP MIAMI FL 33125 ☐ DELETE

TITLE TD
NAME MARTINEZ, MARIANELA
STREET ADDRESS 2246 NW 3 STREET
CITY-ST-ZIP MIAMI FL 33125 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSD
1.2 NAME YGLESIA, EDUARDO M. ☐ Change ☐ Addition
1.3 STREET ADDRESS 1066 S.W. 122 PLACE
1.4 CITY-ST-ZIP MIAMI FL 33184

2.1 TITLE TD
2.2 NAME MARTINEZ, MARIANELA ☐ Change ☐ Addition
2.3 STREET ADDRESS 1066 S.W. 122 PLACE
2.4 CITY-ST-ZIP MIAMI FL 33184

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

REQUIRED President - Eduardo Yglesias

CR2E034 (11/98)