

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Jul 29 1998 8:00am
Secretary of State

DOCUMENT # P96000086783 (3)
1. Corporation Name

RAMON F. ORTIZ, D.M.D. M.S., P.A.

Principal Place of Business

TARPON WOODS PROFESSIONAL BUILDING
800 TARPON WOODS BLVD SUITE D
PALM HARBOR FL 34685

Mailing Address

TARPON WOODS PROFESSIONAL BUILDING
800 TARPON WOODS BLVD SUITE D
PALM HARBOR FL 34685

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/21/1996

4. FEI Number

59-3407339

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 or has paid the current year intangible
Personal Property Tax due June 30.

☒

Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

ORTIZ, RAMON F
TARPON WOODS PROFESSIONAL BUILDING
800 TARPON WOODS BLVD SUITE D
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME ORTIZ, RAMON F
STREET ADDRESS 800 TARPON WOODS BLVD SUITE D
CITY-ST-ZIP PALM HARBOR FL 34685

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

20000026048007
-07/31/98--01090--040
***150.00

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 supplement 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.

SIGNATURE

7-10-98

813-784-0929

CR2E034 (5/98)

July 9, 1998

Ramón F. Ortiz
D.M.D. • M.S. • P.A.

Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, FL 32302-1500

RE: Dr. Ramon F. Ortiz, DMD, MS, PA
FEI # - 59-3407339

Subject: Non - Receipt of First Notice; 1998 Profit Corporation Annual Report
And Waiver of Penalty Filing Fee

Dear Sirs;

As per my CPA, I am writing this letter since I honestly did not receive the first notice for the 1998 Profit Corporation Annual Report.

I recently bought my first dental practice in October 1996 and to my recollection, this is the first time I have received this type notice? I have changed from a bookkeeper to a CPA for handling all my business transactions since Jan 98 and now feel quite confident that these kinds of issues do not go by unnoticed. All such items dealing with the state of Florida, county government, IRS, etc. are given immediate attention and action mandated is accomplished expediently in my office.

I formally request that due to circumstances beyond my control, the penalty for Second Notice filing be waived.

Enclosed find my check for the filing fee of \$ 150.00 to comply with the 1998 Profit Corporation Annual Report.

If there is any questions, please call, FAX, E-mail, or write me.

Thank you in advance for your prompt handling of this request.

Sincerely,

Ramón F. Ortiz
Dr. Ramon F. Ortiz, DMD, MS, PA

Attached - check #2970 for \$ 150.00
And 1998 Annual Report

Optimal Dental Health with a Complete Smile