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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000089628 (7)

DENTAL DOCTOR SERVICES II. INC.

FILED
May 05 1998 8:00am
Secretary of State

Principal Place	e of Business	Mailing Address			48119 (9149 B)148 11981 FBI) (88)
14824 NW 7T		2260 SW 8TH ST 3RD	FL		
MIAMI FL 331	168	MIAMI FL 33135		DO NOT WRITE IN TH	IIS SPACE
US		U\$		3. Date Incorporated or Qualified	IIO OI MOL
				10/31/1996	
2. Principal P	Place of Business	/ 2a. Mailing Address		4. FEI Number	Applied For
21	2260 SW	857. 26		65-0704015	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		3. Certificate of ottatos pesifed	Fee Required
City & State	• FL	City & State		6. Election Campaign Financing	\$5.00 May Be
23 MIS	$2m/\sqrt{2}$	26	Couration	Trust Fund Contribution	Added to Fees
⊒ ື 22/	Country A	7ip	Country	8. This dependence or has paid the	current year Intangible Yes No
<u> 24 عا 24 عا</u>	9. Name and Address of		[30]	Personal Property Tax due June 30. 10. Name and Address of New Register	
EIG	HER, JODIE		81 Name 🔏	1 1/ 0 /	
	BO S W 8TH ST		/4	brid Cource	
	AMI FL 33135		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
MP	AMI FL 33133		83	00 00 001	
S					
			84 City	nm'	L 85 333335
11. Pursuant	to the provisions of Sections 6	07.0502 and 607 1508. Florida Sta	itutes, the above-named cor	rporation subm its this statement for the purpos	e of chanding its registered. I
11. Pursuant office or n	to the provisions of Sections 6 egistered agent, or both, in the	07.0502 and 607.1508, Florida Sta State of Florida, Such change wa Wildelines of Souther 607.0505	Itules, the above-named cor as authorized by the corpora	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as registered
office or re agent. I a	to the provisions of Sections 6 egistered agent, or troth, in the im familiar with and accept the	07.0502 and 607 1508, Florida Sta 2 State of Evrida, Such change wa 3 Ibligations of, Section 607.0505,	as authorized by the corpora Florida Statutes.	rporation submits this statement for the purposetion's board of directors. I hereby accept the	appointment as registered
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office or nagent. La SIGNATURE	egistered agent, or both, in the manufacture with and accept the Stondard wheelver product assess of ego. OFFICES PO PRIETO, ROGER	e State of Evrida. Such change we obligations of, Section 607.0505, Section 607.0505 (https://doi.org/10.0000) READ DIRECTORS	as authorized by the corpora Florida Statutes. NOTE Registered Agent signature requi	ation's board of directors. I hereby accept the control of the con	appointment as registered 23/78 E AND DIRECTORS IN 12
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14. Thereby 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.

marine Maria Colinard

4/23/98 (205)(42-9090