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Sep 03 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 # P96000089631 (1)

1. Corporation Name

DENTAL DOCTOR SERVICES III, INC.

Principal Place of Business

12000 BISCAYNE BLVD. SUITE 108
NORTH MIAMI FL 33181

Mailing Address

12000 BISCAYNE BLVD. SUITE 108
NORTH MIAMI FL 33181-2742



3. Date Incorporated or Qualified

10/31/1996

3a. Date of Last Report

2. Principal Place of Business

21 2260 SW 8 ST

Suite, Apt. #, etc.

22 3rd Floor

City & State

23 Miami, Florida

Zip

24 33135

Country

25 USA

2a. Mailing Address

26 2260 SW 8 ST

Suite, Apt. #, etc.

27 3rd Floor

City & State

28 Miami, Florida

Zip

29 33135

Country

30 USA

4. FEI Number

65-0704016

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DOMINGUEZ, PAULO
12000 BISCAYNE BLVD, SUITE 108
NORTH MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name
Jodie Fisher
82 Street Address (P.O. Box Number is Not Acceptable)
2260 SW 8 ST
83 3rd Floor
84 City
Miami FL 85 Zip Code
33135

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's signature required when reinstalling)

DATE 8/20/97

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
RIVERA, MICHELE M
231-174TH STREET #407
MIAMI BEACH FL 33180

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Director
Roger Prieto
2260 SW 8 ST
Miami, FL 33135

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Secretary - Jodie Fisher
2260 SW 8 ST
Miami, FL 33135

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 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.

SIGNATURE: Jodie Fisher 8/20/97/3058992716

CR2E034 (9/96)