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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000091009 (6)

HARALDO J. OTERO, D.M.D., P.A.

Mailing Address

Principal Place of Business 2020 E. ROBINSON STREEET ORLANDO FL 32803

2020 E. ROBINSON STREEET ORLANDO FL 32803 FILED May 15 1997 8:00 am Secretary of State



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	N		1.6		-				10/31/1996	<u> </u>				
2. Principal Place of Business			26. Mailing Ad	2e. Mailing Address 26					59-3420214		Applied For Not Applicable			
Suite, Apt	#, etc.		Suite, Apt.	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & Star	te		City & State					8. Election Campaign Financing	\$5.00 May Be					
23		·				Trust Fund Contribution		Add	ed to Fees					
Zip Zij	Country Zip 29 30					Country			This corporation has liability for in Florida Statutes			er s. 199.032,	·	
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office or	registered ac	gent, or both, in the Sta	le of Florida. Such ch	ange was a	authorized	i by	the corpo	oration	is board of directors. I hereby accep	t the appo	intmeni	as registere	ď	
agent La	am familiar w	ith, and accept the ob-	gations of, Section 6	07.0505, Fid	orida Stat	utes							- 1	
SIGNATURE	Simple hear	for printed name of registered a	ocal and bile if spokeship	INOT	F. Boolsteren	Ane	n signalus t	to oulred u	when reinstating)	DATE				
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	tw cortify the	at the information suppl	ed with this filing doe	es not quali				ated in	Section 119.07(3)(i) Florida Statutes	Liudher	certify I	hat the		

14. I do hereby certify that the information supplied with this filing does not quality 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

SIGNATURE AND TYPES OR PRINTED IN LIE OF SIGNING OFFICER OR DIRECTOR Date OF Daysime Prone P