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

**PROFIT** CORPORATION **ANNUAL REPORT** 



LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000041019 (5)

FAMILY DENTAL GROUP OF MIAMI #3, INC.

## **FILED** May 19 1998 8:00am Secretary of State



Manual LAKES FL 33014   Manual LAKES FL 33016   Manu				_		
### DO NOT WRITE IN THIS SPACE    Principal Place of Exemises   2a. Making Judgeros   5. Date Incorporated or Qualified   05/08/1997   Applied For   05/08/1997   05/08/1997   05/08/1997   05/08/1997   05/08/1997   05/08/1997   05/08/1997   05/08/1997   05/08/1997   05/08/1997   05/08/1997	Principal Place of Business Mailing Address			f indicidat tia jarit tabit abits agit agitt agitt gatt	MI 11911 ADIBL SIBIR (BJE CADE	
2. Principal Place of Business   2a. Mailing Address   2a. Mailing		14610 DADE PINE AVENUE	Ε.			
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Solido, Apri #, afor    Secretary   Secret	2. Principal Place of Business	2a. Mailing Address		4 FEI Number	Applied For	
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20   Country   29   Country   29   33   33   Country   29   33   33   Country   29   33   33   20   U S A   R. This corporation was or has paid the current year inampable personal and address of Current Replacered Agent   29   33   33   20   U S A   R. This corporation was or has paid the current year inampable   29   No.   29	27			9.		
Zip			5 22127	_		
28   28   31   3   3   3   3   3   3   4   4   4   4						
S. Name and Address of Current Registered Agent  RARCK, PHILLIP B ESO 7850 N.W. 146TH STREET SUITE 502 MIAMI LAXES FL 33016  82 Street Address SP. SBx Number is Not Accomplaint of the purpose of changing its registered agent. In the corporation submits this statement for the purpose of changing its registered agent. In the corporation submits this statement for the purpose of changing its registered agent. In the lamber of the purpose of changing its registered agent	F-3	→ ····· <del>-</del>	a ~ 11/5/14	_		
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11. Pursuant to the provisions of Sections 60/20:02 and 607 15:08. Florida Statutos, the above named corporation submits this statement for the purpose of changing its registered agent. I am familiar with section of the provisions of the purpose of changing its registered agent. I am familiar with provisions and the provisions of the purpose of changing its registered agent. I am familiar with provisions agent. I am familiar with provisions and the purpose of changing its registered agent. I am familiar with provisions agen			83			
11. Pursuant to the provisions of Sections 607 0507 Incid 607 1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. Jam familiar with a provision of section in the provision of sections of the provision of the provision of sections of the provision of the pr	mwadi Burbo i C 00010		QA City	<i>1</i>	as Zin Code	
SIGNATURE  Symbolism is real explanation of the content of the con	^		64 City	MI Am ( FL	33733	
SIGNATURE  Symbolism is real explanation of the content of the con	11. Pursuant to the provisions of Sections 6970502 and 607.1508. Florida Statutos, the above-named corporation submits this statement for the purpose of changing its registered					
SIGNATURE  Symbolism is real explanation of the content of the con	office or registered agent for both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the politique by Section 307,0505, Florida Statutes.					
12.   OFFICE HS AND DIFFICTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND DIFFICENS N 12	SIGNATURE AND YMMUNIAMA 4/16/98					
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14. Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information interest exhibit exempt properties and stated exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information is the second control of the second control of the second certification is the second control of the second certification is the second certification of the second certification is the second certification of the second certification is second certification.		In this filing does not qualify for	the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the information	

by receiver or trostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in attachment will an address.