

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

05-21-2002 91218 036 ***150.00

DOCUMENT # P98000064534

1. Entity Name

HEALTHY SMILE DENTISTRY, INC.

Principal Place of Business

Mailing Address

~~4931 S STATE RD 7~~

~~4931 S STATE RD 7~~

~~DAVIE FL 33314~~

~~DAVIE FL 33314~~

15505 Bull Run Road
 Miami Lakes, FL 33014

15505 Bull Run Road
 Miami Lakes, FL 33014

2. Principal Place of Business

3. Mailing Address

Same as above

Same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0851894

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SADATI, KAZEM S

President

~~4931 S STATE RD 7~~

15505 Bull Run Road
 Miami Lakes, FL 33014

~~DAVIE FL 33314~~

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD President
 NAME SADATI, KAZEM S
 STREET ADDRESS ~~4931 S STATE RD 7~~ 15505 Bull Run Road
 CITY-ST-ZIP ~~DAVIE FL 33314~~ Miami Lakes, FL 33014

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kazem S. Sadati
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/07/02

Date

Daytime Phone #

CR2E034 (4/02)

#1000000000
38967

7/07/02

To whom it may concern:

I sent my application along with a check for \$150.00 for renewal of my corporation previously.

I talked with a representative of your office (Mr. Tyrone Scott) today July 7, 2002, and he said that my corporation has not been renewed because in block 11 of the application form I did not mention my title. I am the president of the corporation and I have enclosed another application with all the complete information (including my change of addresses [business address & mailing address]). Please renew my corporation and notify me to that effect as soon as possible.

Thank you
Kaye S. S. S.
President.

P.S. Mr. Scott noted that my check for \$150.00 has already been deposited by Mrs. Blise.