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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000078032

STRICKLAND & GIANNINI OF SARASOTA D.D.S., P.A.

•					
Principal Place	of Business	Mailing Address			Lifeties He leist leit sein esu
5570 BEE RIDGE ROAD SUITE C-2 5570 BEE RIDGE ROAD SUITE C-2					DO MOT WINTE IN THIS SPACE
SARASOTA FL 34233 SARASOTA FL 34233					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 09/08/1998
Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21 26					65-0861919 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 Additional
22 27					5. Certifcate of Status Desired
City & State City & State					6. Election Campaign Financing \$5.00 May Be
28					Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	,	8. This corporation owes the current year Intangible
24	25	29 30)		Personal Property Tax. Yes No
	9. Name and Address of Curr	ent Registered Agent	81	T	10. Name and Address of New Registered Agent
				Name	,
SILBERSTEIN, DAVID M 720 SOUTH ORANGE AVENUE			82	Street	Address (P.O. Box Number is Not Acceptable)
SARASOTA FL 34236			83	-	
0, 0,	100 // 12 0 1200		"	İ	
			84	'	FL 85 Zip Code
office or re	enistered agent, or both, in the Sta	502 and 607.1508, Florida Statutes, te of Florida. Such change was auth gations of, Section 607.0505, Florid	iorized by	the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Day dn. Silber Signature, typed or printed name of registered	STOIN scient and title if applicable. (NOTE: Re	egistered Age	nt signature	required when reinstating) - DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		☐ DELETE	1.1 TITLE		President Change Addition
NAME	Œ		1.2 NAME		Giarvini, Alessandro
STREET ADDRESS	•		1.3 STREE	TADORESS	1512 Contin
CITY-ST-ZIP			1.4 CITY-	ST-ZIP	Seruseta, Fl 34231 Change Addition
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		Steinkland C
STREET ADDRESS			2.3 STREE	TADORESS	Town, George
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	3145 TORREY PINES BIVE!
TITLE		☐ DELETE	31 TITLE		Strickland, George 3745 Torney Pines Birl Sarasota, Fl 34238
NAME			3.2 NAME		7 / 1 27238
STREET ADDRESS			3.3 STREE	T ADDRESS	
CITY-ST-ZIP			3.4. CITY-	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STRES	TADDRESS	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREE	T ADDRESS	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP	
TITLE		DELETE	6.1 TITLE		Change Addition

14. 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 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, with all other like empowered.

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP