FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

DOCUMENT # V35194 (2)

1. Corporate Name
MAURICE H. NAHMAD, D.D.S., P.A., III

Principal Place of Business
P.O. BOX 16-1110
MIAMI FL 33116

Mailing Address
P.O. BOX 16-1110
MIAMI FL 33116

APPROVED AND FILED

95 MAY -1 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business
21
Suite Apt. #
22
City, State
23
24 25

2a. Mailing Address
26
Suite Apt. #
27
City, State
28
29 30

DO NOT WRITE IN THIS AREA

3. Date of Last Report: 05/11/1992
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0350416
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. Does corporation qualify for changes to under s. 607.0505, Florida Statutes? [X] Yes [ ] No

9. Name and Address of Current Registered Agent
NAHMAD, MAURICE H
13931 S.W. 92 AVE.
MIMAI FL 33176

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to Section 607.0505, Florida Statutes, the above named corporation adopts 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. Check one of the appointed as registered agent. Can change only one or both, but not neither, in Florida Statutes.

SIGNATURE

12. CURRENT OFFICERS AND DIRECTORS
TITLE D
NAME NAHMAD, MAURICE H
STREET ADDRESS 13931 S.W. 92 AVE.
CITY, STATE, ZIP MIAMI FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
Change / Add

14. I hereby certify that the information supplied with this report is accurate and that, for the purposes of the imposition of a fee, I am aware of the provisions of Section 607.0505, Florida Statutes. I further certify that the information indicated on this report or supplemental annual report is true and accurate and that my signature shall serve the same 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 this name appears in Block 12 or Block 13 (if changed) or is attached with an officer.

SIGNATURE: Maurice Nahmad
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95 305-232-5222
DATE TELEPHONE

0205621 CP