SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION FILED SECRETARY OF STATE DIVISION OF CORPORATIONS Sandra B Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS 96 SEP 19 AM 10: 02 DOCUMENT # V57283 (6) LEO J. DURRETT, DDS. P.A. Principal Place of Business Mailing Address 7499 9TH ST N -10/07/96--01027--002 8600 15TH LANE N ST. PETERSBURG FL 33702 ST. PETERSBURG FL 33702 \*\*\*\*375.00 \*\*\*\*375.00 3. Date Incorporated or Qualified 3a. Date of Last Report 08/10/1992 09/08/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3137506 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. 8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation has liability for intangible tex under s. 199 032. 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name DURRETT, LEO J. 6161 9TH STREET NORTH 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33703 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)TITLE DELETE 11 TITLE Change Addition DURRETT, LEO J. NAME 12 NAME CR2E034 7499 9TH ST N STREET ADDRESS 13 STREET ADDRESS ST. PETERSBURG FL CITY - ST - ZIP 14 CITY-ST-ZIP TITLE DELETE 21 TITLE Change Addition NAME 22 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE 31 TITLE | Change | Addition NAME 3 2 NAME STHEET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-2IP DELETE THILE 41 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4 4 City - ST- ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST- ZIP 54 CITY - ST-ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY - ST - 2IP 6 4 CITY - ST- ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Blos open an attachment with an address Leo J. Durrett 7/28/96 (813)522-1616

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0184778