

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 559248

FILED
Jul 08, 2008
Secretary of State

Entity Name: MARTIN N. GLASER, D.M.D., P.A.

Current Principal Place of Business:

CYPRESS VILLAGE SHOPPING CENTER
7409 MIAMI LAKES DRIVE WEST
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

CYPRESS VILLAGE SHOPPING CENTER
7409 MIAMI LAKES DRIVE WEST
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 59-1803470 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASER, MARTIN
10931 S.W. 116TH AVE.
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: GLASER, MARTIN N PSD
Address: 7409 MIAMI LAKES DR W
City-St-Zip: MIAMI LAKES, FL 33014 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTIN GLASER DMD

PRES

07/08/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date