

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003886

FILED
Apr 26, 2004
Secretary of State

Entity Name: NADJA A. HORST, DMD, PA

Current Principal Place of Business:

9101 SUNRISE LAKES BLVD #218
SUNRISE, FL 33322

New Principal Place of Business:

104 S.E. 1ST STREET
FORT LAUDERDALE, FL 33301

Current Mailing Address:

9101 SUNRISE LAKES BLVD #218
SUNRISE, FL 33322

New Mailing Address:

104 S.E. 1ST STREET
FORT LAUDERDALE, FL 33301

FEI Number: 94-3420892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORST, NADJA A DMD
9101 SUNRISE LAKES BLVD #218
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

HORST, NADJA
104 S.E 1ST STREET
FORT LAUDERDALE, FL 33301 US

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: NADJA HORST

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HORST, NADJA A
Address: 9101 SUNRISE LAKES BLVD #218
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HORST, NADJA A
Address: 104 S.E 1ST STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NADJA HORST

P

04/26/2004

Electronic Signature of Signing Officer or Director

Date