

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000001041

FILED
Jan 27, 2009
Secretary of State

Entity Name: GABLES SEDATION DENTISTRY, P.A.

Current Principal Place of Business:

401 MIRACLE MILE
SUITE # 211
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

5932 NW 110TH COURT
DORAL, FL 33178 US

New Mailing Address:

401 MIRACLE MILE
SUITE#211
CORAL GABLES, FL 33134 US

FEI Number: 20-8151456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPARRAGOZA, RAMIRO D.D.S.
5932 NW 110TH COURT
DORAL, FL 33178 US

Name and Address of New Registered Agent:

ESPARRAGOZA, RAMIRO D.D.S.
401 MIRACLE MILE
SUITE#211
CORAL GABLES, FL 33134 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: RAMIRO ESPARRAGOZA

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: FORNARIS, JORGE D.M.D.
Address: 15211 SW 74 CT.
City-St-Zip: PALMETTO BAY, FL 33157 US

Title: VP D () Delete
Name: ESPARRAGOZA, RAMIRO D.D.S.
Address: 5932 NW 110TH COURT
City-St-Zip: DORAL, FL 33178 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: RAMIRO ESPARRAGOZA

VP D

01/27/2009

Electronic Signature of Signing Officer or Director

Date