## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000036409

Entity Name: MIAMI BEACH DENTAL CENTER, PA

FILED Apr 01, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

19653 NW 58TH COURT 975 ARTHUR GODFREY ROAD MIAMI, FL 33015

306

MIAMI BEACH, FL 33140

**Current Mailing Address: New Mailing Address:** 

19653 NW 58TH COURT 975 ARTHUR GODFREY ROAD MIAMI, FL 33015 306

MIAMI BEACH, FL 33140

FEI Number: 20-8679760 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOLIS, ANGIE LAU-SOLIS, ANGIE 19653 NW 58TH COURT 19653 NW 58TH COURT MIAMI, FL 33015 MIAMI, FL 33015

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: ANGIE LAU-SOLIS 04/01/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

DELIMA, ANACONDA C DELIMA, ANACAONA C Name: Name:

3300 NE 191 STREET, #1104 Address: 975 ARTHUR GODFREY ROAD #306 Address:

City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: MIAMI, FL 33140 US

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: ANGIE LAU-SOLIS 04/01/2008 RA