

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000013003

FILED
Apr 28, 2005
Secretary of State

Entity Name: BAHMAN S. AMINI, D.M.D., P.A.

Current Principal Place of Business:

19601 E COUNTRY CLUB DR
#7103
AVENTURA, FL 33180

New Principal Place of Business:

C/O ESSENTIAL BUSINESS SERVICES INC
8741 NW 57 STREET
TAMARAC, FL 33351

Current Mailing Address:

19601 E COUNTRY CLUB DR
#7103
AVENTURA, FL 33180

New Mailing Address:

C/O ESSENTIAL BUSINESS SERVICES INC
8741 NW 57 STREET
TAMARAC, FL 33351

FEI Number: 65-0979602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMINI, BAHMAN S
19601 E COUNTRY CLUB DR
#7103
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

AMINI, BAHMAN S
C/O ESSENTIAL BUSINESS SERVICES INC
8741 NW 57 STREET
TAMARAC, FL 33351 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: BAHMAN S AMINI

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AMINI, BAHMAN S
Address: 19601 E COUNTRY CLUB DR
City-St-Zip: AVENTURA, FL 33180

Title: D () Delete
Name: DUNMYER, ERICA
Address: 2975 NE 190TH STREET
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: AMINI, BAHMAN S
Address: 8741 NW 57 STREET
City-St-Zip: TAMARAC, FL 33351

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

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: BAHMAN S AMINI

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date