

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000115058

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: NUENO DENTAL ASSOCIATES, PA

**Current Principal Place of Business:**

11924 WEST FOREST HILL BLVD  
10B  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

11924 WEST FOREST HILL BLVD  
10B  
WELLINGTON, FL 33414

**New Mailing Address:**

FEI Number: 26-1255475

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NGUYEN, ANHHUY  
575 EDGEBROOK LN  
WEST PALM BEACH, FL 33411 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: NGUYEN, ANHHUY  
Address: 575 EDGEBROOK LN  
City-St-Zip: WEST PALM BEACH, FL 33411

**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: ANHHUY NGUYEN, DDS

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date