| FEI Number: 65-0363614  | Certificate of Status De                   |
|---|--|
| Name and Address of Current Registered Agent:   |  |
| FEIT, STEVEN H<br>3215 NW 63RD STREET<br>BOCA RATON, FL 33496 US                                      |  |
| The above named entity submits this statement for the purpose of changing its registered office or re | gistered agent, or both, in the State of I |
| SIGNATURE:  |  |

# 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V73135

Entity Name: STEVEN H. FEIT, D.M.D., P.A.

## **Current Principal Place of Business:**

240 WEST PALMETTO PARK RD, STE 220 BOCA RATON, FL 33432

### **Current Mailing Address:**

3215 NW 63RD STREET BOCA RATON, FL 33496 US

#### FEI Nu

## Name

Electronic Signature of Registered Agent

Title

Name

Address

**Officer/Director Detail :** DP Title ST FEIT, STEVEN HOWARD Name FEIT, STEVEN HOWARD 240 WEST PALMETTO PARK RD, STE Address 240 WEST PALMETTO PARK RD, STE 220 220

City-State-Zip:

City-State-Zip: BOCA RATON FL 33432

I hereby 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 all other like empowered.

SIGNATURE: STEVEN H FEIT

Electronic Signature of Signing Officer/Director Detail

FILED Jan 27, 2013 Secretary of State CC9585810143

Florida.

Date

esired: No

BOCA RATON FL 33432

01/27/2013 Date

MEMBER