2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008
Secretary of State

DOCUMENT# 518929

Entity Name: GILBERT E. HIRSCHBERG, DDS. P.A.

Current Principal Place of Business:

5644 W. ATLANTIC BLVD
ATLANTIC PROFESSIONAL PLAZA
MARGATE, FL 33063 US

New Principal Place of Business:

Current Mailing Address:

5644 W. ATLANTIC BLVD
ATLANTIC PROFESSIONAL PLAZA
MARGATE, FL 33063 US

New Mailing Address:

FEI Number: 59-1566153 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BORKSON, ELLIOT
200 E. LAS OLAS BLVD
SUITE 1900
FORT LAUDERDALE, FL 33301 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: HIRSCHBERG, GILBERT
Address: 5644 WEST ATLANTIC BLVD
City-St-Zip: MARGATE, FL 33063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: HIRSCHBERG, GILBERT
Address: 5644 WEST ATLANTIC BLVD
City-St-Zip: MARGATE, FL 33063 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: GILBERT E. HIRSCHBERG DR. 02/07/2008

Electronic Signature of Signing Officer or Director Date