2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 543682

Entity Name: CRAIG J. KARA, D.M.D., P.A.

INDIAN HARBOR BEACH, FL

City-St-Zip:

FILED Mar 20, 2008 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Pla	New Principal Place of Business:	
1433 SOUTH PATRICK DRIVE INDIAN HARBOR BEACH, FL 32937				1433 SOUTH PATRICK DRIVE INDIAN HARBOUR BEACH, FL 32937	
Current M	lailing Addres	ss:	New Mailing Add	New Mailing Address:	
1433 SOUTH PATRICK DRIVE INDIAN HARBOR BEACH, FL 32937				1433 SOUTH PATRICK DRIVE INDIAN HARBOUR BEACH, FL 32937	
FEI Number:	: 59-1758855	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Addres	Name and Address of New Registered Agent:	
The above	TH PATRICK ARBOR BEAC	H, FL 32937 US	e purpose of changing its regist	ered office or registered agent, or both,	
SIGNATU					
Election Car		nic Signature of Registered / g Trust Fund Contribution().	Agent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (KARA, CRAIG 1433 S PATRIC INDIAN HRBR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	T (KARA, LISA 1433 S. PATRI) Delete CK DRIVE	Title: Name: Address:	() Change () Addition	

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: CRAIG KARA PD 03/20/2008