

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600973

FILED
Jan 21, 2009
Secretary of State

Entity Name: NORMAN BLUTH, D.D.S. AND BARRY A. BLUTH, D.M.D., P.A.

Current Principal Place of Business:

4175 S.W. 64 AVENUE DAVIE
FORT LAUDERDALE, FL 33314

New Principal Place of Business:

4175 S.W. 64 AVENUE DAVIE
104
FORT LAUDERDALE, FL 33314

Current Mailing Address:

4175 S.W. 64 AVENUE DAVIE
FORT LAUDERDALE, FL 33314

New Mailing Address:

4175 S.W. 64 AVENUE DAVIE
104
FORT LAUDERDALE, FL 33314

FEI Number: 59-1263751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLUTH,NORMAN
4175 S.W. 64TH AVE.
FORT LAUDERDALE, FL 33314 US

Name and Address of New Registered Agent:

BLUTH,NORMAN
4175 S.W. 64TH AVE.
104
FORT LAUDERDALE, FL 33314 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:

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BLUTH,NORMAN,
Address: 4175 S.W. 64TH AVE.
City-St-Zip: FT. LAUDERDALE, FL

Title: D () Delete
Name: BLUTH, BARRY A
Address: 4175 S.W. 64 AVE
City-St-Zip: DAVIE, FL 33314

Title: D () Delete
Name: BLUTH, SHERRI
Address: 4175 S W 64 AVE
City-St-Zip: FT LAUDERDALE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BLUTH,NORMAN,
Address: 4175 S.W. 64TH AVE.
City-St-Zip: FT. LAUDERDALE, FL 33314

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

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: NORMAN BLUTH

PD

01/21/2009

Electronic Signature of Signing Officer or Director

Date