

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604603

FILED  
Jan 17, 2010  
Secretary of State

**Entity Name:** ROBERT F. LIEBLER, D.M.D., P.A.

**Current Principal Place of Business:**

6510 S.W. 93RD AVE.  
MIAMI, FL 33173

**New Principal Place of Business:**

**Current Mailing Address:**

6510 S.W. 93RD AVE.  
MIAMI, FL 33173

**New Mailing Address:**

**FEI Number:** 59-1478206

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIEBLER, ROBERT  
6510 S.W. 93RD AVE.  
MIAMI, FL 33173 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:** PDS  
**Name:** LIEBLER, ROBERT F.  
**Address:** 6510 S.W. 93RD AVE.  
**City-St-Zip:** MIAMI, FL

**Title:** VP  
**Name:** LIEBLER, JANICE R  
**Address:** 6510 SW 93 AVE  
**City-St-Zip:** MIAMI, FL 33173

**Title:** D  
**Name:** LIEBLER, MATTHEW B  
**Address:** 7721 PICKERING DR  
**City-St-Zip:** CHARLOTTE, NC 28213

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:** ROBERT F. LIEBLER

DR.

01/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date