

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604603

FILED  
Jan 03, 2012  
Secretary of State

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

**Current Principal Place of Business:**

8100 SW 81 DRIVE  
MIAMI, FL 33174

**New Principal Place of Business:**

**Current Mailing Address:**

6510 SW 93 AVENUE  
MIAMI, FL 33173 US

**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 F SR  
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

**OFFICERS AND DIRECTORS:**

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

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

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

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, SR

PDS

01/03/2012

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

\_\_\_\_\_ Date