

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 01, 2006 8:00 am
Secretary of State

08-01-2006 90001 016 ***550.00

DOCUMENT # 641012

1. Entity Name
HEDGEPEETH DENTAL, P.A.



Principal Place of Business
**2375 SW 27TH AVE
MIAMI, FL 33145**

Mailing Address
**2375 SW 27TH AVE
MIAMI, FL 33145**



07212006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HEDGEPEETH, QUINTON L
4085 BONITA AVENUE
MIAMI, FL 33133**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HEDGEPEETH, QUINTON 4085 BONITA AVENUE MIAMI, FL 00000, 33133
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dr. Quinton L. Hedgepeeth* **Dr. Quinton L. Hedgepeeth** **7/25/06** **305-856-2300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #