

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 677368 1. Entity Name VEREB AND VEREB, M.D.S, P.A.																																							
Principal Place of Business 5015 MANATEE AV WEST BRADENTON FL 34209-3857		Mailing Address 5015 MANATEE AV WEST BRADENTON FL 34209-3857																																					
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																																					
																																							
		1st MOORE CR2E034 (10/05)																																					
		4. FEI Number 59-2013588																																					
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																					
6. Name and Address of Current Registered Agent VEREB, BARTHOLOMEW 5015 MANATEE AV WEST BRADENTON FL 33529		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																					
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 \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																					
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width:30%;">VDS VEREB, TERESA 5015 MANATEE AV WEST BRADENTON, FL 0</td> <td style="width:10%; text-align: center;"> ☐ Delete </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td>PTD VEREB, BARTHOLOMEW 5015 MANATEE AV WEST BRADENTON, FL 0</td> <td style="text-align: center;"> ☐ Delete </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Delete </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Delete </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Delete </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Delete </td> </tr> </table>		TITLE NAME STREET ADDRESS CITY- ST- ZIP	VDS VEREB, TERESA 5015 MANATEE AV WEST BRADENTON, FL 0	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	PTD VEREB, BARTHOLOMEW 5015 MANATEE AV WEST BRADENTON, FL 0	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td style="width:30%;"></td> <td style="width:10%; text-align: center;"> ☐ Change ☐ Add </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Change ☐ Add </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Change ☐ Add </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Change ☐ Add </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Change ☐ Add </td> </tr> <tr> <td>TITLE NAME STREET ADDRESS CITY- ST- ZIP</td> <td></td> <td style="text-align: center;"> ☐ Change ☐ Add </td> </tr> </table>		TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Add	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Add	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Add	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Add	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Add	TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Change ☐ Add
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <i>Bartholomew VerEB</i> 2.9.06 941 7925578																																							