

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 691338

FILED
Apr 14, 2009
Secretary of State

Entity Name: MARCIA MARTINEZ, D.M.D., P.A.

Current Principal Place of Business:

5180 CURRY FORD RD
ORLANDO, FL 32812

New Principal Place of Business:

Current Mailing Address:

5180 CURRY FORD RD
ORLANDO, FL 32812

New Mailing Address:

FEI Number: 59-2129143 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, MARCIA
5180 CURRY FORD RD.
ORLANDO, FL 32812 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: DR () Delete
Name: MARTINEZ, MARCIA
Address: 5180 CURRY FORD RD
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARCIA MARTINEZ

DMD

04/14/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date