

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731062

FILED
Mar 24, 2011
Secretary of State

Entity Name: THE SOUTHEAST FLORIDA ACADEMY OF GENERAL DENTISTRY, INC.

Current Principal Place of Business:

C/O DR JOSE GUREVICH
8000 SW 40 ST
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

DR IRVING N CARVAJAL
10114 SW 107 AVE
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0725666 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GUREVICH, JOSE DR
6000 SW 40 STREET
MIAMI, FL 33155 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: PE
Name: RODRIGUEZ, JULIO
Address: 7100 SW 99 AVE
City-St-Zip: MIAMI, FL 33155

Title: T
Name: CARVAJAL, IRVING N
Address: 10114 SW 107 AVE
City-St-Zip: MIAMI, FL 33176

Title: S
Name: BRAND, SANDRA
Address: 299 ALHAMBRA CIR.
City-St-Zip: CORAL GABLES, FL 33143

Title: P
Name: MORALES, RICHARD
Address: 229 MIRACLE MILE
City-St-Zip: CORAL GABLES, FL 33134

Title: V
Name: AGUIERRE, ELIZABETH
Address: 10618 SW 69 TERR.
City-St-Zip: MIAMI, FL 33173

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: IRVING N CARVAJAL

TRES

03/24/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date