## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 09, 2005 08:00 AM Secretary of State DOCUMENT # F34596 1. Entity Name JAY H. ROSOFF, D.D.S., P.A. Principal Place of Business Mailing Address 11839 OAK TRAIL WAY 11839 OAK TRAIL WAY PT. RICHEY, FL 34668 PT. RICHEY, FL 34668 02172005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2104638 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROSOFF, JAY H DO NOT WRITE 11839 OAK TRL WAY PORT RICHEY, FL 34668 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 DATE (NOTE flegistered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 U00000295507 П Trust Fund Contribution. Added to Fees 04/09/05-80030-014 150.00 10. OFFICERS AND DIRECTORS IIILE NAME ROSOFF, JAY H 7244 MANOR BEACH ROAD STREET ADDRESS NEW PORT RICHEY, FL 34652 CITY-ST-ZIP шE NAME STREET ADDRESS CITY-ST-ZIP ME NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP MILE NAME STREET ADDRESS CITY-ST-ZIP TILLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

NAME STREET ADDRESS CITY - ST-7IP

President

4/07/05

FILED