2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J09497

Entity Name: PHILIP A. PINE, D.D.S., P.A.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O CHAS. H. BRODZKI C/O CHRISTINE OHLIN 1600 E. ATLANTIC BLVD. 1600 E. ATLANTIC BLVD

POMPANO BCH., FL 330607000 POMPANO BCH., FL 330607000

Current Mailing Address: New Mailing Address:

1600 E ATLANTIC BLVD. POMPANO BEACH, FL 33060 US

FEI Number: 59-2665788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRODZKI, CHAS. H.

633 S. ANDREWS AVENUE
THIRD FLOOR

CHRISTINE OHLIN
440 E. SAMPLE RD.
202

FT. LAUDERDALE, FL 33301 US POMPANO BCH., FL 33064 US

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: CHRISTINE OHLIN 04/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DR (X) Change () Addition

Name: PINE, PHILIP A. Name: PINE, PHILIP A.

Address: 1600 E ATLANTIC BLVD Address: 1600 E ATLANTIC BLVD City-St-Zip: POMPANO BEACH, FL 33060

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: PHILIP PINE OWNE 04/23/2009