## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J27218

Entity Name: JAY ALPERIN, DDS, PA

FILED Apr 07, 2012 Secretary of State

Date

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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2100 LAKE IDA ROAD 2100 LAKE IDA ROAD SUITE 2A SUITE 2A

DELRAY BEACH, FL 33445 DELRAY BEACH, FL 33445 UN

Current Mailing Address: New Mailing Address:

2100 LAKE IDA ROAD SUITE 2A DELRAY BEACH, FL 33445

FEI Number: 59-2704856 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:

MORSE, WILLIAM M 210 NE 6TH AVE, STE 101 DELRAY BEACH, FL 33483 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:

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: ALPERIN, JAY
Address: 3130 LOWSON BLVD.
City-St-Zip: DELRAY BEACH, FL

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

SIGNATURE: JAY ALPERIN P 04/07/2012