2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J66749

1. Entity Name

RICARDO C. GONZALEZ, D.M.D., P.A.



FILED
Mar 07, 2007 08:00 AM
Secretary of State

Principal Place of Business

riace of busilless

550 BILTMORE WAY

8/U Codal Cadles St. 22424 Mailing Address

8852 S.W. 59TH STREET

MIAMI, FL 33173

CORAL GABLES, FL 33134 US



	DO	NOT	WRITE	IN	THIS	SPA	CF
--	----	-----	-------	----	------	-----	----

01222007	No Cng-P	CR2E034 (11/05)		
4. FEI Number 59-2782324			Applied For	
			Not Applicable	

5. Certificate of Status Desired

\$8.75 Additional Fee Required

305-445-1144P

6. Name and Address of Current Registered Agent

GONZALEZ, RICARDO C 8852 S.W. 59TH STREET MIAMI, FL 33173

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	If applicable. (NOTE: Registered	Agent signature	equired when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finan- Trust Fund Contribution.	cing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GONZALEZ, RICARDO C 550 BILTMORE WAY CORAL GABLES, FL 33134				11000000000
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000658442 03/15/07-80038-017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY_ST_7/P					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.