

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K52951

FILED
Oct 27, 2008
Secretary of State

Entity Name: FELIPE R. MARTIN, D.D.S., P.A.

Current Principal Place of Business:

FELIPE R. MARTIN, D.D.S, P.A.
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

17868 NW 2ND ST
PEMBROKE PINES, FL 33029

New Mailing Address:

FELIPE R. MARTIN, D.D.S, P.A.
PEMBROKE PINES, FL 33029

FEI Number: 65-0092345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTIN, FELIPE R, DDS., P.A.
17868 NW 2ND STREET
PEMBROKE PINES, FL 33029 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: FELIPE R. MARTIN

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTIN, FELIPE R. DD, S
Address: 20050 NW 8TH ST
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FELIPE R. MARTIN

Electronic Signature of Signing Officer or Director

PE

10/27/2008

Date