2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 19, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # K98906 J. VALDES, D.D.S., P.A.				Secre	etary of State
Principal Place 7755 SW. 87 SUITE 100 MIAMI, FL 3	7 AVE. 7	ailing Address 1755 SW. 87 AVE. UITE 100 IIAMI, FL 33173				
C	OO NOT WRITE II	The second secon	CE	1	o Chg-P CR	2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
VALDES, I 12471 SW MIAMI, FL		DO NOT WRITE IN THIS SPACE				
the obligat	a named entity submits this statement for the ptions of registered agent. Signature, typed or printed name of registered agent and title LE NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	prompting or a transportation of printing or	ed Agent signature required	man is a supplicable of the state of the sta	he State of Florida. I	arya demonstration
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD VALDES, RAFAEL J. 10543 SW 109 CT MIAMI, FL	TOBS	to the state of th	0	U00000235 2/19/05-806	950 28-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				•	OT WRI	i
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			And the second s			
of the cor changed,	certify that the information supplied with this file on this report or supplemental report is true a poration or the receiver or trusted empowered, or on an attachment with an address with all	i to execute this report as requ	emption stated in Se ature shall have the lired by Chapter 607	oction 119.07(3)(i), Flor same legal effect as if r, Florida Statutes; and	that my name appea	certify that the information at I am an officer or director ars in Block 10 or Block 11 if