

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# L01737

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** DAVID D. PENA, D.M.D., P.A.

**Current Principal Place of Business:**

8034 NW 154TH STREET  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

12781 MIRAMAR PARKWAY  
#106  
MIRAMAR, FL 33027

**Current Mailing Address:**

8034 NW 154TH STREET  
MIAMI LAKES, FL 33016

**New Mailing Address:**

12781 MIRAMAR PARKWAY  
#106  
MIRAMAR, FL 33027

**FEI Number:** 65-0129534

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PENA, DAVID D  
8034 NW 154 ST  
MIAMI LAKES, FL 33016 US

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

PENA, DAVID D  
12781 MIRAMAR PARKWAY  
#106  
MIRAMAR, FL 33027 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:** DAVID D PENA

04/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** PENA, DAVID D., D.M.D.  
**Address:** 12781 MIRAMAR PARKWAY #106  
**City-St-Zip:** MIRAMAR, FL 33027

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:** DAVID D PENA

P

04/18/2011

Electronic Signature of Signing Officer or Director

Date