2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# L04762

Entity Name: FILIBERTO J. HERDOCIA, D.D.S. & ASSOCIATES, P.A.

Current Principal Place of Business:

17140 ROYAL PALMBLVD
STE 2
WESTON, FL 33326

New Principal Place of Business:

19966 SW 130 AVE
MIAMI, FL 33177

Current Mailing Address:

17140 ROYAL PALM BLVD
STE 2
WESTON, FL 33326

New Mailing Address:

19966 SW 130 AVE
MIAMI, FL 33177

FEI Number: 65-0108532 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERDOCIA, FILIBERTO J
20793 S.W. 129 CT
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

HERDOCIA, FILIBERTO J D.D.S.
19966 SW 130 AVE
MIAMI, FL 33177 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: FILIBERTO J HERDOCIA 04/24/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: HERDOCIA, FILIBERTO, J.
Address: 20793 S.W. 129 CT.
City-St-Zip: MIAMI, FL 33177

Title: DST ( ) Delete
Name: HERDOCIA, MARY A.,
Address: 20793 S.W. 129 CT.
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DDS (X) Change ( ) Addition
Name: HERDOCIA, FILIBERTO, J.
Address: 19966 SW 130 AVE
City-St-Zip: MIAMI, FL 33177

Title: DST (X) Change ( ) Addition
Name: HERDOCIA, MARY A.,
Address: 19966 SW 130 AVE
City-St-Zip: MIAMI, FL 33177

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: FILIBERTO J HERDOCIA DDS 04/24/2008
Electronic Signature of Signing Officer or Director Date