

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L04762

**FILED**  
**Apr 24, 2008**  
**Secretary of State**

**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