

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

**FILED**  
**Jan 31, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000085466**

1. Entity Name

**DONALD P. RUBENSTEIN, D.D.S., PROFESSIONAL  
LIMITED LIABILITY COMPANY**



Principal Place of Business

Mailing Address

**848 N.E. 20TH AVENUE  
FT. LAUDERDALE FL 33304**

**848 N.E. 20TH AVENUE  
FT. LAUDERDALE FL 33304**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/07)

4. FEI Number

**20-3731158**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUBENSTEIN, DONALD P  
848 NE 20TH AVE  
FT. LAUDERDALE FL 33304**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered agent's signature required when registering)

DATE

**FILE NOW!!! FEE IS \$138.75**

**After May 1, 2008, Fee Will Be \$538.75**

**Make Check Payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<b>MGRM</b>			<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<b>RUBENSTEIN, DONALD P D.D.S.</b>									
	<b>848 N.E. 20TH AVENUE</b>									
	<b>FT. LAUDERDALE FL 33304</b>									
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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**U00000808457**  
**02/07/08-80049-016 138.75**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

**SIGNATURE:**

*Don P. Rubenstein*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

*1/29/08*

Digitized by PRC