

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000003670

Entity Name: ALEX R. PEREZ DDS LLC

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1550 W -84TH STREET  
SUITE 3  
HIALEAH, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

512 - 35TH ST.  
UNION CITY, NJ 07087

**New Mailing Address:**

FEI Number: 20-4176424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEREZ, ALEXIS R  
7215 MIAMI LAKES DR., APT A10  
MIAMI LAKES, FL 33014 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PEREZ, ALEXIS R  
Address: 8875 NW 172ND TERRACE  
City-St-Zip: MIAMI, FL 33018

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: ALEX PEREZ

MGRM

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date