

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039028

Entity Name: LESTER GIL D.D.S., LLC

FILED
Jan 06, 2009
Secretary of State

Current Principal Place of Business:

28125 S.W. 159 PLACE
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

28125 S.W. 159 PLACE
HOMESTEAD, FL 33033

New Mailing Address:

FEI Number: 26-2449942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIL, LESTER
28125 S.W. 159 PLACE
HOMESTEAD, FL 33033 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 () Delete
Name: GIL, LESTER
Address: 28125 S.W. 159 PLACE
City-St-Zip: HOMESTEAD, FL 33033

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: LESTER GIL

PDTE

01/06/2009

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