

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L18531

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** ERNESTO F. GALGUERA, D.D.S., P.A.

**Current Principal Place of Business:**

351 NW 42 AVE  
#203  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

351 NW 42 AVE  
#203  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:** 65-0152210      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GALGUERA, ERNESTO F, DDS PA  
351 NORTHWEST 42 AVENUE  
SUITE #203  
MIAMI, FL 33126 US

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

GALGUERA, ERNESTO F, DDS PA  
351 NW 42 AVE  
#203  
MIAMI, FL 33126 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: DR. ERNESTO GALGUERA

01/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GALGUERA, ERNESTO F DR.  
Address: 351 NORTHWEST 42 AVENUE #203  
City-St-Zip: MIAMI, FL 33126

I hereby 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 all other like empowered.

SIGNATURE: DR. ERNESTO GALGUERA

DR.

01/05/2011

Electronic Signature of Signing Officer or Director

Date