


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 07, 2005 8:00 am**  
**Secretary of State**

02-07-2005 90072 030 \*\*\*150.00

<b>DOCUMENT # L29403</b>			
1. Entity Name <b>VINDRA MAHARAJ, D.D.S., P.A.</b>			
Principal Place of Business <b>314 S. UNIVERSITY DRIVE PLANTATION FL 33324 US</b>		Mailing Address <b>1900 NE 22ND TERRACE FORT LAUDERDALE FL 33305 US</b>	
2. Principal Place of Business <b>1776 N. PINE ISLAND RD</b>		3. Mailing Address	
Suite, Apt. #, etc. <b>SUITE 300</b>		Suite, Apt. #, etc.	
City & State <b>PLANTATION FL</b>		City & State	
Zip <b>33322</b>		Country <b>USA</b>	
6. Name and Address of Current Registered Agent <b>MAHARAJ ROY, VINDRA 1900 NE 22ND TERRACE FT LAUDERDALE FL 33305</b>		7. Name and Address of New Registered Agent	
		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 <u>Vindra Maharaj Roy</u> (VINDRA MAHARAJ ROY) PRESIDENT 1/30/05 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MAHARAJ-ROY, VINDRA 1900 NE 22ND TERR FT LAUDERDALE FL 33305 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Vindra Maharaj Roy</u> (VINDRA MAHARAJ ROY) PRESIDENT 1/30/05 568 4219 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			