

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M64949

FILED  
Apr 18, 2006  
Secretary of State

**Entity Name:** BOCA RATON PEDIATRIC DENTISTRY, INC.

**Current Principal Place of Business:**

7301 W. PALMETTO PARK RD.  
SUITE #203B  
BOCA RATON, FL 334333456 US

**New Principal Place of Business:**

**Current Mailing Address:**

7301 W. PALMETTO PARK RD.  
SUITE #203B  
BOCA RATON, FL 334333456 US

**New Mailing Address:**

**FEI Number:** 20-2069876

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WERNER, PAUL  
7301 W. PALMETTO PARK RD. #203B  
BOCA RATON, FL 33433 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WERNER, PAUL,  
Address: 22144 VERBENA WAY  
City-St-Zip: BOCA RATON, FL 33433

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

**SIGNATURE:** PAUL WERNER DDS

PD

04/18/2006

Electronic Signature of Signing Officer or Director

Date