

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M73523

**FILED**  
**Feb 27, 2011**  
**Secretary of State**

**Entity Name:** PAUL E. BERNSTEIN, D.D.S., P.A.

**Current Principal Place of Business:**

90290 OVERSEAS HWY  
#107  
TAVERNIER, FL 33070

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 587  
TAVERNIER, FL 33070

**New Mailing Address:**

**FEI Number:** 65-0036932

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BERNSTEIN, PAUL E P  
90290 OVERSEAS HIGHWAY  
SUITE #107  
TAVERNIER, FL 33070 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: BERNSTEIN, PAUL E  
Address: 110 1RST TERRACE  
City-St-Zip: LEY LARGO, FL 33037

Title: D  
Name: BERNSTEIN, BARBARA  
Address: 110 1RST TERRACE  
City-St-Zip: KEY LARGO, FL 33037

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: PAUL E. BERNSTEIN

P

02/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date