2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000013331

Entity Name: SONYA D. LEWIS. D.M.D., P.A.

10252 SW 12TH STREET

HOLLYWOOD, FL 33025

Address: City-St-Zip: FILED Apr 09, 2008 Secretary of State

Littly Na	IIIe. SONTA D. LEVVIS, D.IVI	.D., F.A.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10400 GR	FFIN RD				
303 COOPER	CITY, FL 33328				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
10400 GR	FFIN RD				
303 COOPER	CITY, FL 33328				
FEI Number	: 65-1006729 FEI Number A	applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
LEWIS, SONYA 10400 GRIFFIN RD COOPER CITY, FL 33328 US			LEWIS, SONYA 10400 GRIFFIN RD #303 COOPER CITY, FL 33	10400 GRIFFIN RD	
	named entity submits this stee of Florida.	atement for the pu	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				04/09/2008	
	Electronic Signature o	f Registered Agen	t	Date	
Election Ca	npaign Financing Trust Fund Co	ntribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S () Delete LEWIS, JERRY JR 10252 SW 12TH STREET HOLLYWOOD, FL 33025		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete LEWIS, DOLORES 10252 SW 12TH STREET HOLLYWOOD, FL 33025		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	STD () Delete LEWIS, JERRY		Title: Name:	() Change () Addition	

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 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.

Address:

City-St-Zip:

SIGNATURE: SONYA D. LEWIS PRES 04/09/2008