

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000028763

Entity Name: KNJ DENTAL, P.A.

FILED
Apr 25, 2009
Secretary of State

Current Principal Place of Business:

3245 SOUTHSIDE BOULEVARD
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

3245 SOUTHSIDE BOULEVARD
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3632698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LAW OFFICES OF JIM FARAH, P.A.
8823 SAN JOSE BOULEVARD
207
JACKSONVILLE, FL 32217 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: PSTD () Delete
Name: VERA, KEVIN
Address: 3245 SOUTHSIDE BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: VERA, KEVIN
Address: 6122 HECKSCHER DR.
City-St-Zip: JACKSONVILLE, FL 32226

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.

SIGNATURE: KEVIN VERA

DR.

04/25/2009

Electronic Signature of Signing Officer or Director

Date