## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000057398

Entity Name: LUIS F. GOMEZ, D.D.S., P.A.

FILED Apr 17, 2008 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
5180 COCONUT CREEK PKWY MARGATE, FL 330633913				5180 COCONUT CREEK PKWY MARGATE, FL 33063	
Current Mailing Address:			New Mailing Address:		
5180 COCONUT CREEK PKWY MARGATE, FL 330633913			5180 COCONUT CREEK PKWY MARGATE, FL 33063		
FEI Number	: 65-1025280	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
5180 CÓC	UIS F D.D.S. ONUT CREE! E, FL 3306339				
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	jent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	GOMEZ, LUIS	JT CREEK PKWY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GOMEZ, OLĠ	JT CREEK PKWY	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: LUIS F GOMEZ DR 04/17/2008