

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000067961

FILED
Jun 06, 2008
Secretary of State

Entity Name: PERIODONTICS & IMPLANTOLOGY OF PEMBROKE PINES, INC.

Current Principal Place of Business:

700 N. HIATUS RD.
SUITE 201
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

2314 SW 135TH AVENUE
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 65-1027688

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNG, DENISE A
2314 SW 135TH AVENUE
MIRAMAR, FL 33027 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: P () Delete
Name: YOUNG, DENISE
Address: 2314 SW 135TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCKENZIE, CARRON O MR.
Address: 1072 SW 113 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP () Change (X) Addition
Name: YOUNG, DENISE A DR.
Address: 2314 SW 135TH AVENUE
City-St-Zip: MIRAMAR, FL 33027 US

Title: GM () Change (X) Addition
Name: YOUNG, MARY E MRS.
Address: 357 SANDPIPER AVENUE
City-St-Zip: WEST PALM BEACH, FL 33411 US

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: DENISE A. YOUNG, DDS

VP

06/06/2008

Electronic Signature of Signing Officer or Director

Date