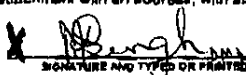


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000075274			
1. Entity Name MANREET K. SINGH, D.M.D., P.A.			
Principal Place of Business 600 S DIXIE HIGHWAY SUITE 100 BOCA RATON, FL 33432		Mailing Address 600 S DIXIE HIGHWAY SUITE 100 BOCA RATON, FL 33432	
DO NOT WRITE IN THIS SPACE		07032006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-1037447	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SINGH, MANREET 600 S DIXIE HIGHWAY SUITE 100 BOCA RATON, FL 33432		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTIF: Registered Agent signature required when relieving)			
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE	D		
NAME	SINGH, MANREET K		
STREET ADDRESS	600 S DIXIE HWY #100		
CITY- ST- ZIP	BOCA RATON, FL 33432		
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other filers empowered.			
SIGNATURE: 		X 7/10/06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

000000571082
07/19/06-80001-003 150.00