

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90311 050 ***150.00

DOCUMENT # P00000089124

1. Entity Name
JUAN PEREZ-SOLAR DDS, P.A.

Principal Place of Business 1470 N.W. 107TH AVENUE SUITE F MIAMI FL 33172	Mailing Address 1470 N.W. 107TH AVENUE SUITE F MIAMI FL 33172
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2. Principal Place of Business 2438 W 60th Street	3. Mailing Address 2438 W 60th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State HALEAH FL	City & State HALEAH FL	4. FEI Number EIN 65-1041063	Applied For <input checked="" type="checkbox"/> Not Applicable
Zip 33016	Country	Zip 33016	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
PEREZ-SOLAR, JUAN
1470 N.W. 107TH AVENUE
SUITE F
MIAMI FL 33172

7. Name and Address of New Registered Agent
 Name
PEREZ-SOLAR, JUAN
 Street Address (P.O. Box Number is Not Acceptable)
2438 W 60th Street
 City **HALEAH** **FL** Zip Code **33016**

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Delete PEREZ-SOLAR, JUAN 1470 N.W. 107TH AVENUE SUITE F MIAMI FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PEREZ-SOLAR, JUAN 2438 W 60 Street HALEAH FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN E PEREZ-SOLAR Date: 04/01/01 Daytime Phone #: (305) 558-6832

CR2E034 (10/00)