# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 04, 2008**
**Secretary of State**

DOCUMENT# P01000014860

**Entity Name:** JEFFREY E. RUBIN DDS. P.A.

**Current Principal Place of Business:**

12630 WORLD PLAZA LANE
FT. MYERS, FL 33907

**New Principal Place of Business:**

26800 SOUTH TAMIAMI TRAIL
350
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

12630 WORLD PLAZA LANE
FT. MYERS, FL 33907

**New Mailing Address:**

26800 SOUTH TAMIAMI TRAIL
350
BONITA SPRINGS, FL 34134

**FEI Number: 65-0397685** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RUBIN, JEFFREY
5534 COGNAC DR.
FT. MYERS, FL 33919 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

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: RUBIN, JEFFREY
Address: 5534 COGNAC DR.
City-St-Zip: FT. MYERS, FL 33919

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition
Name: RUBIN, JEFFREY
Address: 5534 COGNAC DR.
City-St-Zip: FT. MYERS, FL 33919 US

Title: VP ( ) Change (X) Addition
Name: RUBIN, LARYSA
Address: 5534 COGNAC DRIVE
City-St-Zip: FORT MYERS, FL 33919 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: JEFFREY RUBIN PD 05/04/2008

Electronic Signature of Signing Officer or Director Date