

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000016920

FILED
Apr 09, 2008
Secretary of State

Entity Name: RICARDO PERALES, DMD, P.A.

Current Principal Place of Business:

5600 SW 135TH AVE
209
MIAMI, FL 33183

New Principal Place of Business:

10730 NW 66TH STREET
110
MIAMI, FL 33178

Current Mailing Address:

5600 SW 135TH AVE
209
MIAMI, FL 33183

New Mailing Address:

10730 NW 66TH STREET
110
MIAMI, FL 33178

FEI Number: 65-1079887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERALES, RICARDO
10730 N W 66TH STREET, #110
MIAMI, FL 33178 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PERALES, RICARDO
Address: 10730 NW 66TH ST #A-110
City-St-Zip: MIAMI, FL 33178

Title: V () Delete
Name: BRACA, GIOVANNA
Address: 10730 NW 66TH ST #A-110
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICARDO PERALES

P

04/09/2008

Electronic Signature of Signing Officer or Director

_____ Date