

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000023600

Entity Name: NATALIA ALVARADO, DMD, PA

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

1390 E TERRA MAR DR
POMPANO BCH, FL 33062

New Principal Place of Business:

3220 S TERRA MAR DR
LAUDERDALE BY THE SEA, FL 33062

Current Mailing Address:

1390 E TERRA MAR DR
POMPANO BCH, FL 33062

New Mailing Address:

3220 S TERRA MAR DR
LAUDERDALE BY THE SEA, FL 33062

FEI Number: 65-1092401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVARADO, NATALIA
1390 E TERRA MAR DR
POMPANO BCH, FL 33062 US

Name and Address of New Registered Agent:

ALVARADO, NATALIA
3220 S TERRA MAR DR
LAUDERDALE BY THE SEA, FL 33062 US

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: NATALIA ALVARDAO, DMD

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDVT () Delete
Name: ALVARADO, NATALIA
Address: 1390 E TERRA MAR DR
City-St-Zip: POMPANO BCH, FL 33062

Title: SCM () Delete
Name: ALVARADO, NATALIA
Address: 1390 E TERRA MAR DR
City-St-Zip: POMPANO BCH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDVT (X) Change () Addition
Name: ALVARADO, NATALIA
Address: 3220 S TERRA MAR DR
City-St-Zip: LAUDERDALE BY THE SEA, FL 33062

Title: SCM (X) Change () Addition
Name: ALVARADO, NATALIA
Address: 3220 S TERRA MAR DR
City-St-Zip: LAUDERDALE BY THE SEA, FL 33062

I hereby certify that the information supplied with this filing does not qualify for the 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: NATALIA ALVARADO, DMD

PDVT

04/18/2006

Electronic Signature of Signing Officer or Director

Date