

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000091751

FILED
Oct 23, 2008
Secretary of State

Entity Name: ZENEYDA ALCEQUIEZ DDS., P.A.

Current Principal Place of Business:

10240 SW 56TH STREET, SUITE 107
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

10240 SW 56TH STREET, SUITE 107
MIAMI, FL 33165

New Mailing Address:

FEI Number: 65-1149466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALCEQUIEZ, ZENEYDA
10240 SW 56TH STREET, SUITE 107
MIAMI, FL 33165 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: ZENEYDA ALCEQUIEZ

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: D () Delete
Name: ALECQUIEZ, ZENEYDA
Address: 665 NW 85TH PLACE APT. #206
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: ALECQUIEZ, ZENEYDA
Address: 665 NW 85TH PLACE APT. #206
City-St-Zip: MIAMI, FL 33126

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: ZENEYDA ALCEQUIEZ

Electronic Signature of Signing Officer or Director

PRES

10/23/2008

Date