2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008
Secretary of State

DOCUMENT# P01000107816

Entity Name: MARTIN S. YODOWITZ, DMD, P.A.

Current Principal Place of Business:

4674 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33417

New Principal Place of Business:

1309 S FLAGLER DRIVE
SUITE 4
WEST PALM BEACH, FL 33401

Current Mailing Address:

4674 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33417

New Mailing Address:

1309 S FLAGLER DRIVE
SUITE 4
WEST PALM BEACH, FL 33401

FEI Number: 65-1157100 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YODOWITZ, MARTIN S
4674 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33417 US

Name and Address of New Registered Agent:

YODOWITZ, MARTIN S
1309 S. FLAGLER DRIVE
SUITE 4
WEST PALM BEACH, FL 33401 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: 01/14/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: YODOWITZ, MARTIN S
Address: 4674 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33417

Title: VS ( ) Delete
Name: YODOWITZ, PAULA
Address: 4674 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: YODOWITZ, MARTIN S
Address: 5885 NW 40 TERRACE
City-St-Zip: BOCA RATON, FL 33496

Title: VS (X) Change ( ) Addition
Name: YODOWITZ, PAULA
Address: 5885 NW 40 TERRACE
City-St-Zip: BOCA RATON, FL 33496

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: MARTIN YODOWITZ PRES 01/14/2008
Electronic Signature of Signing Officer or Director — Date