

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 26, 2009
Secretary of State**

DOCUMENT# P01000110846

Entity Name: ROBERTO BENITEZ, D.D.S., INC.

Current Principal Place of Business:

1620 N HWY A1A
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

1620 N HWY A1A
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 65-1152025 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENITEZ, ROBERTO
1620 N. HWY A1A
SATELLITE BEACH, FL 32937 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: ROBERTO BENITEZ DDS

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: PRES () Delete
Name: BENITEZ, ROBERTO
Address: 1620 N HWY A1A
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S () Delete
Name: RAMOS-BENITEZ, LINETTE
Address: 1620 N. HWY A1A
City-St-Zip: SATELLITE BEACH, FL 32937

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: ROBERTO BENITEZ DDS

PRES

10/26/2009

Electronic Signature of Signing Officer or Director

Date