2007 FOR DROFIT CORPORA

FILED Apr 09, 2007 08:00 A Secretary of State

CR2E034 (11/05)

Applied For Not Applicable

\$8.75 Additional

Fee Required

ANN	\mathbf{A}		
DOCUMENT # P0200 1. Entity Name NILDA M ARCEO, D.D.S., P.A			
Principal Place of Business	Mailing Address	ł	
8460 S.W. 88TH STREET MIAMI, FL 33156	8460 S.W. 88TH STREET MIAMI, FL 33156		
DO NOT WE	RITE IN THIS SPA	^E	04032007 No Chg-P
	ALE HA TIMO OLY	O L	4. FEI Number 04-3613849
. 4			5. Certificate of Status Desire
6. Name and Address of	Current Registered Agent		

	6. Name and Address of Current Regis	tered Agent			
ARCEO, NILDA M 8460 S.W. 88TH STREET MIAMI, FL 33156		DO NOT WRITE IN THIS SPACE			
	named entity submits this statement for the plions of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable (NOTE: Registered	I Agent signature	required when reinstating)	DATE
	E NOW!!! FEE IS \$150,00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	,	, ,,	, '
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARCEO, NILDA M 8460 S.W. 88TH STREET MIAMI, FL 33156	`			U00000696064 04/17/07-80086-004 150.0
TITLE NAME STREET ADDRESS CITY-ST-ZIP					04/17/07-80086-004 150.0
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE		· · · · · ·			4

Desired

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP