2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000036946

Entity Name: LEONID R. BRISKIN, D.M.D., P.A.

FILED Mar 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8320 W. SUNRISE BLVD SUITE# 110 PLANTATION, FL 33322

Current Mailing Address: New Mailing Address:

8320 W. SUNRISE BLVD SUITE# 110 PLANTATION, FL 33322

FEI Number: 04-3661945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRISKIN, LEONID R
20341 NE 30 AVENUE
PH # 6
AVENTURA, FL 33180 US

BRISKIN, LEONID R
8320 W. SUNRISE BLVD
SUITE# 110
PLANTATION, FL 33322 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: LEONID R BRISKIN 03/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: BRISKIN, LEONID R DMD
Address: 20341 NE 30 AVENUE PH-6 Address: 8320 W. SUNRISE BLVD, SUITE# 110

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: PLANTATION, FL 33322

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: LEONID R BRISKIN P 03/27/2007