

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061146

FILED
Jan 30, 2006
Secretary of State

Entity Name: ILLYA Y. NOVIKOV, DOCTOR OF DENTISTRY, P.A.

Current Principal Place of Business:

17105 SAN CARLOS BLVD
SUITE B-3
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

13615 EAGLE RIDGE DRIVE
APT. 1618
FORT MYERS, FL 33912

New Mailing Address:

14752 CALUSA PALMS DR.
UNIT 202
FORT MYERS, FL 33919

FEI Number: 01-0708306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILBERSTEIN, DAVID M
720 S ORANGE AVE
SARASOTA, FL 34236 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NOVIKOV, ILLYA Y
Address: 13615 EAGLE RIDGE DRIVE, APT. 1618
City-St-Zip: FT. MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NOVIKOV, ILLYA Y
Address: 14752 CALUSA PALMS DR
City-St-Zip: FT. MYERS, FL 33919

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: ILLYA Y. NOVIKOV

P

01/30/2006

Electronic Signature of Signing Officer or Director

Date