

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000126079

FILED
Mar 01, 2007
Secretary of State

Entity Name: DORAL ISLES DENTISTS, P.A.

Current Principal Place of Business:

New Principal Place of Business:

10769 N W 58 ST.
MIAMI, FL 33178

Current Mailing Address:

New Mailing Address:

10769 N W 58 ST.
MIAMI, FL 33178

FEI Number: 13-4226521

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:

PEREZ-MARTI, HECTOR
10769 N W 58 ST.
MIAMI, FL 33178 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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEREZ-MARTI, HECTOR
Address: 10769 N W 58 ST.
City-St-Zip: MIAMI, FL 33178

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HECTOR PEREZ-MARTI

P

03/01/2007

Electronic Signature of Signing Officer or Director

Date