

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000066503

FILED
Nov 06, 2006
Secretary of State

Entity Name: INDIAN TRACE DENTAL ASSOCIATES, P.A.

Current Principal Place of Business:

46 INDIAN TRACE RD., UNIT A
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1160 NW 100 WAY
PLANTATION, FL 33322

New Mailing Address:

9951 WINDING RIDGE LANE
DAVIE, FL 33324

FEI Number: 57-1171801

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARDOUNEL, ALEX
46 INDIAN TRACE RD., UNIT A
WESTON, FL 33326 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: ALEX CARDOUNEL

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: D () Delete
Name: CARDOUNEL, ALEX
Address: 46 INDIAN TRACE RD., UNIT A
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALEX CARDOUNEL

Electronic Signature of Signing Officer or Director

PRES

11/06/2006

Date