2008 FOR PROFIT CORPORATION

Mar 06, 2008 8:00 am **Secretary of State ANNUAL REPORT** 03-06-2008 90038 012 ***150.00 **DOCUMENT # P03000147872** TAMÍR M. SEGAL, D.M.D., P.A. 40039357 Principal Place of Business Mailing Address 2731 EXECUTIVE PARK DRIVE C/O RONNY J. HALPERIN, P.A. SUITE #6 312 SE 17TH ST., SECOND FLOOR WESTON, FL 33331 FT. LAUDERDALE, FL 33316 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01242008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 90-0140388 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired п Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Ronny J. Halperin, P.A. RONNY J. HALPERIN, P.A. Street Address (P.O. Box Number is 17961 Biscayne Boulevard. 312 SE 17TH ST. SECOND FLOOR Suite B-1 FT. LAUDERDALE, FL 33316 Aventura, FL 33160 8. The above named entity submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered ag-**SIGNATURE** (NOTE: Registered Agent skiriature required when reinstating) DATE Med name of registered agent and little if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE Change ☐ Addition ☐ Delete NAME NAME SEGAL, TAMIR M DR. 2731 EXECUTIVE PARK DRIVE, STE. #6 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON, FL 33331 CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete 11114 NAME NAME STREET ADORESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

FILED

ATTACHMENT

WRITTEN CONSENT IN LIEU OF

AN ANNUAL MEETING

OF

STOCKHOLDERS AND BOARD OF DIRECTORS

OF

TAMIR M. SEGAL, D.M.D., P.A.

- 1. **RESOLVED**, that each of the current Directors are re-elected and confirmed as the Directors of the Corporation to serve until the next annual meeting of stockholders, or until a successor of each shall have been duly elected and shall have qualified.
- 2. **RESOLVED**, that each of the current Officers of the Corporation are re-appointed and confirmed to their current office, to hold such offices until the next annual directors' meeting or until successors are duly elected and have qualified.
- 3. **RESOLVED**, that any and all actions taken to date on behalf of the Corporation as an officer by any of the officers, and all actions taken to date on behalf of the Corporation as a director by any of the directors are hereby ratified and approved as fully as if such actions were authorized,

ATTACHMENT 40039357 4 P03000 147812

approved and consented to prior to their commission even if such person was not an officer and/or director at the time such act was committed.

DATED, this 2\ day of 60. 2008.

DIRECTORS:	SHAREHOLDERS:
Turni m. Segul DMD, P.A.	