

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153201

FILED  
Mar 08, 2005  
Secretary of State

Entity Name: AMANDA M. FAIGEN, R.N., D.D.S., INC.

## Current Principal Place of Business:

12300 ALT A1A, # 115  
PALM BEACH GARDENS, FL 33410

## New Principal Place of Business:

## Current Mailing Address:

12300 ALT A1A, # 115  
PALM BEACH GARDENS, FL 33410

## New Mailing Address:

FEI Number: 22-0590701

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TRAVANI & RICHTER, PA  
818 US HWY 1  
STE A  
N PALM BEACH, FL 33408 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: PD ( ) Delete  
Name: FAIGEN, AMANDA M  
Address: 12300 ALT A1A, # 115  
City-St-Zip: PALM BEACH GARDENS, FL 33410

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition  
Name: FAIGEN, AMANDA M  
Address: 12300 ALT A1A, # 115  
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AMANDA M. FAIGEN, RN, DDS

DR

03/08/2005

Electronic Signature of Signing Officer or Director

Date