2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2008
Secretary of State

DOCUMENT# P04000013685

Entity Name: VAL DANIYAR, DMD, P.A.

Current Principal Place of Business:

4588 TAMIAMI TRAIL NORTH
NAPLES, FL 34103

New Principal Place of Business:

681 GOODLETTE RD. NORTH
SUITE #110
NAPLES, FL 34102

Current Mailing Address:

4588 TAMIAMI TRAIL NORTH
NAPLES, FL 34103

New Mailing Address:

681 GOODLETTE RD. NORTH
SUITE #110
NAPLES, FL 34102

FEI Number: 20-0629282 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLEMAN, J. MICHAEL
CONROY, COLEMAN & HAZZARD, P.A.
2640 GOLDEN GATE PKWY, STE 115
NAPLES, FL 34103 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: DR ( ) Delete
Name: DANIYAR, VAL
Address: 4588 TAMIAMI TRAIL NORTH
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: DANIYAR, VAL
Address: 681 GOODLETTE RD. NORTH, SUITE 110
City-St-Zip: NAPLES, FL 34102

I hereby certify that the information supplied with this filing does not qualify 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: VAL DANIYAR DR 01/17/2008
Electronic Signature of Signing Officer or Director — Date