

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000038447

FILED
Jul 11, 2006
Secretary of State

Entity Name: BROWARD DENTAL ASSOCIATES, INC.

Current Principal Place of Business:

8333 W. MCNAB ROAD
#126
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

4503 NW 103RD AVE
#101
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 20-0797568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DULAY, RAJ CPA
4503 NW 103RD AVE
#101
SUNRISE, FL 33351 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

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: P () Delete
Name: DULAY, RAJVINDER DMD
Address: 4503 NW 103RD AVE
City-St-Zip: SUNRISE, FL 33351 US

Title: VP () Delete
Name: DULAY, RAJ CPA
Address: 4503 NW 103RD AVE
City-St-Zip: SUNRISE, FL 33351 FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: R DULAY

VP

07/11/2006

Electronic Signature of Signing Officer or Director

Date