

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000056013

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** RITA STEINER, D.M.D., P.A.

**Current Principal Place of Business:**

19080 NE 29TH AVE  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

10155 COLLINS AVE.  
1806  
BAL HARBOR, FL 33154

**New Mailing Address:**

**FEI Number:** 20-1225456      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

STEINER, RITA  
10155 COLLINS AVE.  
1806  
BAL HARBOR, FL 33154 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: STEINER, RITA  
Address: 10155 COLLINS AVE., 1806  
City-St-Zip: BAL HARBOR, FL 33154

I hereby 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 all other like empowered.

SIGNATURE: RITA STEINER

DR.

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date