

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000116268

FILED
Jan 24, 2006
Secretary of State

Entity Name: HOWARD B. SHULLMAN, DMD, P.A.

Current Principal Place of Business:

6290 LINTON BLVD.
DELRAY BEACH, FL 33484

New Principal Place of Business:

9859-21 LAKE WORTH ROAD
LAKE WORTH, FL 33467

Current Mailing Address:

6290 LINTON BLVD.
SUITE 101
DELRAY BEACH, FL 33484

New Mailing Address:

9859-21 LAKE WORTH ROAD
LAKE WORTH, FL 33467

FEI Number: 20-1677120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHULLMAN, HOWARD B
6290 LINTON BLVD.
SUITE 101
DELRAY BEACH, FL 33484 US

Name and Address of New Registered Agent:

SHULLMAN, HOWARD B
9859-21 LAKE WORTH ROAD
LAKE WORTH, FL 33467 US

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:

01/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: SHULLMAN, HOWARD B
Address: 6290 LINTON BLVD.
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SHULLMAN, HOWARD B
Address: 9859-21 LAKE WORTH ROAD
City-St-Zip: LAKE WORTH, FL 33467

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: HOWARD SHULLMAN

DR.

01/24/2006

Electronic Signature of Signing Officer or Director

Date