## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000068192

Entity Name: KAWVEH NOFALLAH, D.M.D., P.A.

FILED Jun 12, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3624 HARDEN BLVD LAKELAND, FL 33803 US

Current Mailing Address: New Mailing Address:

6747 EAGLE RIDGE BLVD LAKELAND, FL 33813 US

FEI Number: 20-2855082 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ADAMS, HAL 1642 MEDICAL LANE SUITE A FORT MYERS, FL 33907 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title:

 Name:
 NOFALLAH, KAWVEH
 DMD

 Address:
 3624 HARDEN BLVD

 City-St-Zip:
 LAKELAND, FL 33803

Title: D

Name: NOFALLAH, KAWVEH DMD Address: 3624 HARDEN BLVD City-St-Zip: LAKELAND, FL 33803

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: KAWVEH NOFALLAH DR 06/12/2012