

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000101958

Entity Name: SIMON AMIR, DMD, P.A.

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2922 SW 68 TH LANE  
GAINESVILLE, FL 32608

**New Principal Place of Business:**

**Current Mailing Address:**

2922 SW 68 TH LANE  
GAINESVILLE, FL 32608

**New Mailing Address:**

FEI Number: 20-3199107

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIMON, AMIR T  
2922 SW 68 LN  
GAINESVILLE, FL 32608 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,T  
Name: AMIR, SIMON T  
Address: 2922 SW 68TH LANE  
City-St-Zip: GAINESVILLE, FL 32608

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: SIMON AMIR

P, T

01/05/2012

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

\_\_\_\_\_  
Date