

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000117756

FILED
Mar 09, 2012
Secretary of State

Entity Name: REZA ARDALAN, DMD, P.A.

Current Principal Place of Business:

374 SW PRIMA VISTA BLVD.
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

374 SW PRIMA VISTA BLVD.
PORT ST. LUCIE, FL 34983

New Mailing Address:

FEI Number: 20-3404121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARDALAN, REZA PRES
833 SW GRAND RESERVE BLVD
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

ARDALAN, REZA PRES
679 SW SQUIRE JOHN'S LANE
PALM CITY, FL 34990 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: REZA ARDALAN

03/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: ARDALAN, REZA
Address: 679 SW SQUIRE JOHN'S LANE
City-St-Zip: PALM CITY, FL 34990 US

Title: VPRES
Name: ARDALAN, KIMBERLY M
Address: 679 SW SQUIRE JOHN'S LANE
City-St-Zip: PALM CITY, FL 34990 US

Title: DIR
Name: ARDALAN, REZA
Address: 679 SW SQUIRE JOHN'S LANE
City-St-Zip: PALM CITY, FL 34990 US

Title: SEC
Name: ARDALAN, REZA
Address: 679 SW SQUIRE JOHN'S LANE
City-St-Zip: PALM CITY, FL 34990

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: REZA ARDALAN

PRES

03/09/2012

Electronic Signature of Signing Officer or Director

Date