

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000018867

FILED  
Mar 15, 2007  
Secretary of State

Entity Name: CAROLINA GONZALEZ DMD, PA

## Current Principal Place of Business:

888 BRICKELL KEY DR  
#1200  
MIAMI, FL 33131

## New Principal Place of Business:

888 BRICKELL KEY DR  
#1908  
MIAMI, FL 33131

## Current Mailing Address:

888 BRICKELL KEY DR  
#1200  
MIAMI, FL 33131

## New Mailing Address:

888 BRICKELL KEY DR  
#1908  
MIAMI, FL 33131

FEI Number: 20-4282806

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, CAROLINA  
888 BRICKELL KEY DR  
#1200  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

GONZALEZ, CAROLINA  
888 BRICKELL KEY DR  
#1908  
MIAMI, FL 33131 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: \_\_\_\_\_

03/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: GONZALEZ, CAROLINA  
Address: 888 BRICKELL KEY DR #1200  
City-St-Zip: MIAMI, FL 33131

Title: VP ( ) Delete  
Name: GONZALEZ, CAROLINA  
Address: 888 BRICKELL KEY DR #1200  
City-St-Zip: MIAMI, FL 33131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: GONZALEZ, CAROLINA  
Address: 888 BRICKELL KEY DR #1908  
City-St-Zip: MIAMI, FL 33131

Title: VP (X) Change ( ) Addition  
Name: GONZALEZ, CAROLINA  
Address: 888 BRICKELL KEY DR #1908  
City-St-Zip: MIAMI, FL 33131

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: CAROLINA GONZALEZ

PSTD

03/15/2007

Electronic Signature of Signing Officer or Director

Date