2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# P06000037053

Entity Name: RAFAEL ALCALDE, DDS, P.A.

Current Principal Place of Business:

8280 VILLAGE EDGE CIRCLE #3
FT. MYERS, FL 33919

New Principal Place of Business:

33 BARKLEY CIRCLE
SUITE B
FORT MYERS, FL 33907

Current Mailing Address:

8280 VILLAGE EDGE CIRCLE #3
FT. MYERS, FL 33919

New Mailing Address:

33 BARKLEY CIRCLE
SUITE B
FORT MYERS, FL 33907

FEI Number: 20-4593420 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALCALDE, RAFAEL
8280 VILLAGE EDGE CIRCLE #3
FT. MYERS, FL 33919 US

Name and Address of New Registered Agent:

ALCALDE, RAFAEL
33 BARKLEY CIRCLE
SUITE B
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: 01/09/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ALCALDE, RAFAEL
Address: 8280 VILLAGE EDGE CIRCLE #3
City-St-Zip: FT. MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ALCALDE, RAFAEL
Address: 33 BARKLEY CIRCLE, SUITE B
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify 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: RAFAEL ALCALDE D 01/09/2008
Electronic Signature of Signing Officer or Director — Date