

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000066230

**FILED**  
**Dec 21, 2010**  
**Secretary of State**

**Entity Name:** MILAIDIS ECHEZARRAGA, D.D.S., P.A.

**Current Principal Place of Business:**

13920 SW 47TH STREET  
SUITE 105  
MIAMI, FL 33175

**New Principal Place of Business:**

**Current Mailing Address:**

13920 SW 47TH STEET  
SUITE 105  
MIAMI, FL 33175

**New Mailing Address:**

2362 SW 154 AVE  
MIAMI, FL 33185

**FEI Number:** 20-4856003

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ECHEZARRAGA, MILAIDIS  
15749 SW 44TH TERR  
MIAMI, FL 33185 US

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

ECHEZARRAGA, MILAIDIS  
2362 SW 154 AVE  
MIAMI, FL 33185 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: MILAIDIS ECHEZARRAGA

12/21/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: ECHEZARRAGA, MILAIDIS  
Address: 13920 SW 47TH STREET SUITE 105  
City-St-Zip: MIAMI, FL 33175

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: MILAIDIS ECHEZARRAGA

DR

12/21/2010

Electronic Signature of Signing Officer or Director

Date