


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # P06000084468 1. Entity Name MARIA GONZALEZ-FUJARA D.D.S., P.A.	
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Principal Place of Business 5333 COLLINS AVENUE 1211 MIAMI BEACH, FL 33140-3249 US	Mailing Address 5333 COLLINS AVENUE 1211 MIAMI BEACH, FL 33140-3249 US
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DO NOT WRITE IN THIS SPACE



01102008 No Chg-P CR2E034 (11/05)

4. FEI Number 36-3750622	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ-FUJARA, MARIA A D.D.S.
 5333 COLLINS AVENUE
 1211
 MIAMI BEACH, FL 33140-3249

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000784326
 01/16/08-80049-023 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GONZALEZ-FUJARA, MARIA A D.D.S.
STREET ADDRESS	5333 COLINS AVENUE
CITY-ST-ZIP	1211, FL 331403249
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on attachment with an address, with all other like empowered.

SIGNATURE Maria A. Gonzalez-Fujara MARIA A. GONZALEZ-FUJARA 1/10/2008 305 861-1996
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #