

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000154891

FILED  
Mar 24, 2009  
Secretary of State

**Entity Name:** FLORIDA CENTER FOR ESTHETIC DENTISTRY, P.A.

**Current Principal Place of Business:**

9825 W. SAMPLE RD., SUITE 100  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

9825 W. SAMPLE RD.  
SUITE 100  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

9825 WEST SAMPLE ROAD  
SUITE 100  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

**FEI Number:** 20-8237785      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FRIEDMAN, KATIA DDS  
9825 W. SAMPLE RD., SUITE 100  
CORAL SPRINGS, FL 33065 US

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

FRIEDMAN, KATIA DDS  
9825 W. SAMPLE RD.  
SUITE 100  
CORAL SPRINGS, FL 33065 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: KATIA FRIEDMAN

03/24/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PVSD ( ) Delete  
Name: FRIEDMAN, KATIA DDS  
Address: 9825 W. SAMPLE RD., SUITE 100  
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KATIA FRIEDMAN

PVSD

03/24/2009

Electronic Signature of Signing Officer or Director

Date