

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000064717

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** MAYA GEORGES ASSI, D.M.D., P.A.

**Current Principal Place of Business:**

10641 SW WESTLAWN BLVD  
PORT ST LUCIE, FL 34987

**New Principal Place of Business:**

6268 W SAMPLE ROAD  
UNIT 401  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

10641 SW WESTLAWN BLVD  
PORT ST LUCIE, FL 34987

**New Mailing Address:**

6268 W SAMPLE ROAD  
UNIT 401  
CORAL SPRINGS, FL 33067

**FEI Number:** 26-0293849

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASSI, MAYA GEORGES D.M.D.  
10641 SW WESTLAWN BLVD  
PORT ST LUCIE, FL 34987 US

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

ASSI, MAYA GEORGES D.M.D.  
6268 W SAMPLE ROAD  
CORAL SPRINGS, FL 33067 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:** MAYA GEORGES ASSI

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** ASSI, MAYA GEORGES  
**Address:** 6268 W SAMPLE ROAD  
**City-St-Zip:** CORAL SPRINGS, FL 33067

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:** MAYA GEORGES ASSI

D

04/20/2011

Electronic Signature of Signing Officer or Director

Date