

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068752

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Entity Name:** GOHILL AND AGUDELO, D.D.S., P.A.

**Current Principal Place of Business:**

6971 W SUNRISE BLVD SUITE 101  
PLANTATION, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

6971 W SUNRISE BLVD SUITE 101  
PLANTATION, FL 33313

**New Mailing Address:**

**FEI Number:** 11-3814961

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOHILL, JULIANA K  
6971 W SUNRISE BLVD SUITE 101  
PLANTATION, FL 33313 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

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

**OFFICERS AND DIRECTORS:**

**Title:** D/P  
**Name:** GOHILL, JULIANA K DDS  
**Address:** 6971 W SUNRISE BLVD SUITE 101  
**City-St-Zip:** PLANTATION, FL 33313

**Title:** S/T  
**Name:** AGUDELO, MONICA A DDS  
**Address:** 6971 W SUNRISE BLVD SUITE 101  
**City-St-Zip:** PANTATION, FL 33313

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: JULIANA GOHILL

PRES

04/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date