

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076984

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: MIGUEL A. MONTILLA D.M.D. P.A.

## Current Principal Place of Business:

3249 MUIRFIELD  
WESTON, FL 33332 US

## New Principal Place of Business:

2901 N.W. 126 AVENUE  
#225  
SUNRISE, FL 33323 US

## Current Mailing Address:

3249 MUIRFIELD  
WESTON, FL 33332 US

## New Mailing Address:

2901 N.W. 126 AVENUE  
#225  
SUNRISE, FL 33323 US

FEI Number: 26-0485618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONTILLA, MIGUEL A  
3249 MUIRFIELD  
WESTON, FL 33332 US

## Name and Address of New Registered Agent:

MONTILLA, MIGUEL A  
2901 N.W. 126 AVENUE  
#225  
SUNRISE, FL 33323 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:

03/09/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MIGUEL, MONTILLA A  
Address: 3249 MUIRFIELD  
City-St-Zip: WESTON, FL 33332 US

Title: VP ( ) Delete  
Name: MONTILLA, ELIZABETH A  
Address: 3249 MUIRFIELD  
City-St-Zip: WESTON, FL 33332 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MIGUEL, MONTILLA A  
Address: 2901 N.W. 126 AVENUE, #225  
City-St-Zip: SUNRISE, FL 33323 US

Title: VP (X) Change ( ) Addition  
Name: MONTILLA, ELIZABETH A  
Address: 2901 N.W. 126 AVENUE, #225  
City-St-Zip: SUNRISE, FL 33323 US

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: MIGUEL A. MONTILLA

P

03/09/2009

Electronic Signature of Signing Officer or Director

Date