

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000016445

Entity Name: ELI ABBO DMD,P.A.

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3031 NE 163RD ST.  
NORTH MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

3031 NE 163RD ST.  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

FEI Number: 26-2961201

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ABBO, ELI  
19940 NE 22ND CT  
MIAMI, FL 33180 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ABBO, ELI  
Address: 19940 NE 22ND CT  
City-St-Zip: MIAMI, FL 33180

Title: D  
Name: ABBO, ILIANA  
Address: 19940 NE 22ND CT  
City-St-Zip: MIAMI, FL 33180

Title: D  
Name: ABBO, BILL  
Address: 19940 NE 22ND CT  
City-St-Zip: MIAMI, FL 33180

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: ELI ABBO

P

02/22/2011

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

\_\_\_\_\_  
Date