

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000057433

Entity Name: MAIKEL SEGUI DDS, P.A.

**FILED**  
**Jan 28, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

9022 WEST ATLANTIC BLVD APT# 226  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

6165 NW 99 WAY  
PARKLAND, FL 33076

**Current Mailing Address:**

9022 WEST ATLANTIC BLVD APT# 226  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

6165 NW 99 WAY  
PARKLAND, FL 33076

FEI Number: 26-2788972

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEGUI, MAIKEL  
9022 WEST ATLANTIC BLVD APT# 226  
CORAL SPRINGS, FL 33071 US

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

SEGUI, MAIKEL  
6165 NW 99 WAY  
PARKLAND, FL 33076 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: MAIKEL SEGUI

01/28/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SEGUI, MAIKEL  
Address: 6165 NW 99 WAY  
City-St-Zip: PARKLAND, FL 33076

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: MAIKEL SEGUI

P

01/28/2010

Electronic Signature of Signing Officer or Director

Date