## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000068311

Entity Name: JANICE KANNIKAL, DMD, P.A.

FILED Apr 20, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

19762 NW 59TH PLACE 4993 WEST ATLANTIC AVE MIAMI, FL 33015

LEGACY DENTAL

DELRAY BEACH, FL 33445

**Current Mailing Address: New Mailing Address:** 

19762 NW 59TH PLACE 300 S AUSTRALIAN AVE

MIAMI, FL 33015 **UNIT 1005** 

WEST PALM BEACH, FL 33401

FEI Number: 26-3013385 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KANNIKAL, JANICE KANNIKAL, JANICE 300 S AUSTRALIAN AVE 19762 NW 59TH PLACE

MIAMI, FL 33015 US **UNIT 1005** WEST PALM BEACH, FL 33401 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.

04/20/2012 SIGNATURE: JANICE KANNIKAL

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

KANNIKAL, JANICE Name:

300 S AUSTRALIAN AVE, UNIT 1005 Address: City-St-Zip: WEST PALM BEACH, FL 33401 US

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: JANICE KANNIKAL MS 04/20/2012