

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000046867

FILED
Apr 25, 2012
Secretary of State

Entity Name: TOWNCARE DENTAL OF CUTLER BAY, P.A.

Current Principal Place of Business:

13195 SW 134 STREET, 2ND FLOOR
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

13195 SW 134 STREET, 2ND FLOOR
MIAMI, FL 33186

New Mailing Address:

FEI Number: 27-0300610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTERAMERICAN CORPORATE SERVICES, LLC
2525 PONCE DE LEON BLVD.
SUITE 1225
CORAL GABLES, FL 33134 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: DIR
Name: GOBER, MELVYN S DDS
Address: 13195 SW 134 STREET, 2ND FLOOR
City-St-Zip: MIAMI, FL 33186

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: MELVYN S. GOBER, DDS

DIR

04/25/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date