

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000073526

FILED  
Apr 20, 2011  
Secretary of State

Entity Name: EMILIA ISAZA DDS PA

**Current Principal Place of Business:**

325 SOUTH DIXIE HWY SUITE 5  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

325 SOUTH DIXIE HWY SUITE 5  
LAKE WORTH, FL 33460

**New Mailing Address:**

FEI Number: 27-0850999

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ISAZA, EMILIA  
325 SOUTH DIXIE HWY SUITE 5  
LAKE WORTH, FL 33460 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: PD  
Name: ISAZA, EMILIA  
Address: 6080 C DURHAM DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: VP  
Name: SUAREZ, MATTHEW N  
Address: 6080 C DURHAM DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: S  
Name: SUAREZ, MATTHEW N  
Address: 6080 C DURHAM DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: T  
Name: SUAREZ, ISABELLA M  
Address: 6080 C DURHAM DR  
City-St-Zip: LAKE WORTH, FL 33467

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: EMILIA ISAZA

PD

04/20/2011

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

\_\_\_\_\_  
Date