

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000080239

**FILED**  
**Feb 19, 2012**  
**Secretary of State**

**Entity Name:** MATTHEW A. GIUNTA, D.M.D., P.A.

**Current Principal Place of Business:**

4302 N HABANA AVE SUITE 100  
TAMPA, FL 33607

**New Principal Place of Business:**

4302 N HABANA AVE  
SUITE 100  
TAMPA, FL 33607

**Current Mailing Address:**

4302 N HABANA AVE SUITE 100  
TAMPA, FL 33607

**New Mailing Address:**

4302 N HABANA AVE  
SUITE 100  
TAMPA, FL 33607

**FEI Number:** 27-2549762

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIUNTA, MATTHEW A DMD  
4301 N HABANA AVE SUITE 100  
TAMPA, FL 33607 US

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

GIUNTA, MATTHEW A DMD  
4301 N HABANA AVE  
SUITE 100  
TAMPA, FL 33607 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:

02/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: GIUNTA, MATTHEW A  
Address: 4302 N. HABANA AVE, SUITE 100  
City-St-Zip: TAMPA, FL 33607 US

Title: OM  
Name: GIUNTA, PEGGY B  
Address: 4302 N. HABANA AVE SUITE 100  
City-St-Zip: TAMPA, FL 33606 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: MATTHEW A. GIUNTA, D.M.D., PA

PRES

02/19/2012

Electronic Signature of Signing Officer or Director

Date