2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000091340

Title:

Name: Address:

City-St-Zip:

VΡ

SABET, KIYA D

3632 CORDGRASS DR VALRICO, FL 33596 US

Entity Name: SABET FAMILY DENTISTY INCORPORATED

FILED Apr 29, 2012 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	A PINECRES ⁻ FL 33596				
Current Mailing Address:			New Mailing Address:		
	A PINECREST FL 33596				
FEI Number:	90-0539719	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	LIENNE V DE DGRASS DR. FL 33596				
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS	AND DIREC	TORS:			
Title: Name: Address: City-St-Zip:	P SABET, JULIEN 3632 CORGRA VALRICO, FL	SS DR			

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: JULIENNE SABET DDS PRES 04/29/2012