

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000053320

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Entity Name:** RICARDO ROMERO, D.D.S. PA

**Current Principal Place of Business:**

2975 NE, 190 ST, APT - 108  
AVENTURA, FL 33180

**New Principal Place of Business:**

10270 SW 59 ST  
COOPER CITY, FL 33328 US

**Current Mailing Address:**

2975 NE, 190 ST, APT - 108  
AVENTURA, FL 33180

**New Mailing Address:**

10270 SW 59 ST  
COOPER CITY, FL 33328 US

**FEI Number:** 27-2987441

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROMERO, RICARDO DR.  
2975 NE, 190 ST, APT - 108  
AVENTURA, FL 33180 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: ROMERO, RICARDO DDS  
Address: 2975 NE, 190 ST, APT - 108  
City-St-Zip: AVENTURA, FL 33180

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: RICARDO ROMERO

PT

01/12/2011

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

\_\_\_\_\_  
Date