

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000077122

FILED
Apr 12, 2012
Secretary of State

Entity Name: PALM BEACH ROOT CANAL, P.A.

Current Principal Place of Business:

44 COCOANUT ROW #206
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

44 COCOANUT ROW #206
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 65-0386857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPHS, AILEEN ESQ
301 CLEMATIS STREET
STE 3000
WEST PALM BEACH, FL 33401 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: DP
Name: JOSEPHS, MITCHELL DR
Address: 44 COCOANUT ROW #206
City-St-Zip: PALM BEACH, FL 33480

Title: DV
Name: JOSEPHS, HILLARY
Address: 5507 GARFIELD STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: DS
Name: WALBORSKY, AURA
Address: 3474 CYPRESS TRAIL APT F-204
City-St-Zip: WEST PALM BEACH, FL 33417

Title: DT
Name: HONIG, BRUCE
Address: 5507 GARFIELD STREET
City-St-Zip: HOLLYWOOD, FL 33021

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: MITCHELL JOSEPHS

DR

04/12/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date