

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000052056

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** ORANGE AVENUE DENTISTRY, INC.

**Current Principal Place of Business:**

2116 SOUTH ORANGE AV.  
ORLANDO, FL 32806

**New Principal Place of Business:**

**Current Mailing Address:**

2116 SOUTH ORANGE AV.  
ORLANDO, FL 32806

**New Mailing Address:**

**FEI Number:** 45-2441756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YOUSSEF, NABIL N  
2116 SOUTH ORANGE AV.  
ORLANDO, FL 32806 US

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

YOUSSEF, NABIL N JR  
2116 SOUTH ORANGE AV.  
ORLANDO, FL 32806 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: NABIL YOUSSEF

04/11/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: YOUSSEF, NABIL N JR  
Address: 2116 SOUTH ORANGE AV.  
City-St-Zip: ORLANDO, FL 32806

Title: S/T  
Name: YOUSSEF, NABIL N  
Address: 2116 SOUTH ORANGE AV.  
City-St-Zip: ORLANDO, FL 32806

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: NABIL YOUSSEF

PRES

04/11/2012

Electronic Signature of Signing Officer or Director

Date