2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000048906

Entity Name: ANA V. AVILES, D.M.D., P.A.

FILED Jan 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12297 PEMBROKE RD. .5420 N W 107 AVE PEMBROKE PINES, FL 33025 .5420 N W 107 AVE

DORAL, FL 33178

Current Mailing Address: New Mailing Address:

12297 PEMBROKE RD. 5420 N W 107 AVE PEMBROKE PINES, FL 33025 309 DORAL, FL 33178

FEI Number: 65-0447098 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AVILES, ANA V
12297 PEMBROKE ROAD
PEMBROKE PINES, FL 33025
US
AVILES, ANA V
5420 NW 107 AVE
309
DORAL, FL 33178 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: ANA V AVILES 01/23/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 AVILES, ANA V
 Name:
 AVILES, ANA V

 Address:
 12297 PEMBROKE RD
 Address:
 5420 N W 107 AVE

 City-St-Zip:
 PEMBROKE PINES, FL 33025
 City-St-Zip:
 309, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANA V AVILES P 01/23/2007