2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000021643

City-St-Zip: OVIEDO, FL 32765

Entity Name: ROBERT M. BLISS, D.M.D., P.A. OF OVIEDO, FLORIDA

FILED Mar 15, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
4250 ALAI OVIEDO,	FAYA TRAIL, \$ FL 32765	STE. 192			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
4250 ALAI OVIEDO,	FAYA TRAIL, \$ FL 32765	STE. 192			
FEI Number	: 59-3240685	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of I	Name and Address of New Registered Agent:	
1040 BAY SUITE 424	CLINTON M VIEW DRIVE 4 JDERDALE, F	L 33304 US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered o	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	PS (BLISS, ROBER 1985 WESTBO		Title: (Name: Address:) Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT M. BLISS PS 03/15/2005