

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000051314

FILED  
Apr 03, 2008  
Secretary of State

Entity Name: FREDDY GUERRERO, D.D.S., P.A.

**Current Principal Place of Business:**

14762 S.W. 56TH STREET  
MIAMI, FL 33185

**New Principal Place of Business:**

**Current Mailing Address:**

14762 S.W. 56TH STREET  
MIAMI, FL 33185

**New Mailing Address:**

FEI Number: 65-0522459

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GUERRERO, FREDDY DDS  
14762 S.W. 56TH STREET  
MIAMI, FL 33185 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GUERRERO, FREDDY D.D.S.  
Address: 14762 SW 56 STREET  
City-St-Zip: MIAMI, FL 33185

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SCR ( ) Change (X) Addition  
Name: FREDDY, GUERRERO  
Address: 14762 SW 56 STREET  
City-St-Zip: MIAMI, FL 33185

I hereby certify that the information supplied with this filing does not qualify 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: FREDDY GUERRERO

PTE

04/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date