## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000091717

Entity Name: PEMBROKE PINES DENTAL ASSOCIATES, P.A.

FILED Apr 20, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of E	Business:
1 SW 129 AVE SUITE 406 PEMBROKE PINES, FL 33027		
Current Mailing Address:	New Mailing Address:	
1 SW 129 AVE SUITE 406 PEMBROKE PINES, FL 33027		
FEI Number: 65-0629102 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		ew Registered Agent:
KINACI, HAKAN DMD 1 SW 129 AVE SUITE 408 PEMBROKE PINES, FL 33027 US		
The above named entity submits this statement for the puin the State of Florida.	urpose of changing its registered of	fice or registered agent, or both,
SIGNATURE:		
Electronic Signature of Registered Ager	nt	Date

## **OFFICERS AND DIRECTORS:**

Title: DR

 Name:
 KINACI, HAKAN DMD

 Address:
 1 SW 129 AVE, SUITE 408

 City-St-Zip:
 PEMBROKE PINES, FL 33027

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: HAKAN KINACI DR. 04/20/2012