## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P95000091778** 

1. Entity Name

Principal Place of Business

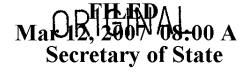
1535 PROSPERITY FARMS RD LAKE PARK, FL 33403

DENTCO OF SOUTH FLORIDA, INC.



Mailing Address

1535 PROSPERITY FARMS RD LAKE PARK, FL 33403





03062007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0640432

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

561-848-0087

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

RAICH, NICK 1535 PROSPERITY FARMS RD LAKE PARK, FL 33403

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

| 8. 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. I am familiar with, and accept the obligations of registered agent.  |  |  |             |                                |  |
|--|--|--|-------------|--------------------------------|--|
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating)  DATE   |  |  |             |                                |  |
| FILE NOWIII FEE IS \$150.00<br>After May 1, 2007 Fee will be \$550.00  |  | Election Campaign Finar Trust Fund Contribution. | ncing       | \$5.00 May Be<br>Added to Fees |  |
| 10. OFFICERS AND DIRECTORS   |  |  |             |                                |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | PD<br>RAICH, NICHOLAS S JR<br>1535 PROSPERITY FARMS RD<br>LAKE PARK, FL 33403      |  |             |                                | U00000662197   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | VPD '<br>RAICH, NICHOLAS S SR<br>1535 PROSPEEERITY FARMS RD<br>LAKE PARK, FL 33403 |  |             |                                | 03/21/07-80003-017 150.00                                  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | SD<br>RAICH, SHARON M<br>1535 PROSPERITY FARMS RD<br>LAKE PARK, FL 33403           |  |             | DO                             | NOT WRITE  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | D<br>RAICH, JOSEPH<br>1535 PROSPERITY FARM RD<br>LAKE PARK, FL 33403               |  |             | IN <sup>1</sup>                | THIS SPACE   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | TD<br>RAICH, ANTHONY<br>1535 PROSPERITY FARMS RD<br>LAKE PARK, FL 33403            |  |             |                                |  |
| NAME STREET ADDRESS CITY-ST-ZIP  | D RODRIGUEZ, ARMANDO 1535 PROSPERITY FARMS RD LAKE PARK, FL 33403                  | illion door and qualify falling av               | motions so: | atained in Chapter 11          | 2. Florida Statutos I further certify that the information |
| 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplied entails the and accurate and that my 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attactment with an address, with all other like empowered. |  |  |             |                                |  |