

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000030856

FILED
Jan 08, 2007
Secretary of State

Entity Name: PLANTATION PARK DENTAL ASSOCIATES, P.A.

Current Principal Place of Business:

7420 N.W. 5TH ST.
101
PLANTATION, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

9951 WINDING RIDGE LANE
DAVIE, FL 33324 US

New Mailing Address:

FEI Number: 65-0659334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARDOUNEL, ALEX
9951 WINDING RIDGE LANE
DAVIE, FL 33324 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: D () Delete
Name: CARDOUNEL, ALEX D.D.S.
Address: 9951 WINDING RIDGE LANE
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: CARDOUNEL, ALEX D.D.S.
Address: 9951 WINDING RIDGE LANE
City-St-Zip: DAVIE, FL 33324

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: ALEX CARDOUNEL

DR.

01/08/2007

Electronic Signature of Signing Officer or Director

Date