

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000036535

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** MARIA MEZCUA, D.D.S., P.A.

**Current Principal Place of Business:**

18503 PINES BLVD.  
#202 & #203  
PENBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

18503 PINES BLVD.  
# 202, # 203  
PENBROKE PINES, FL 33029

**New Mailing Address:**

18503 PINES BLVD.  
#202 & #203  
PENBROKE PINES, FL 33029

**FEI Number:** 65-0664882

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARUSI, DANIEL S  
517 SW FIRST AVE  
FT LAUDERDALE, FL 33301 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: PSTD  
Name: MEZCUA, MARIA  
Address: 18503 PINES BLVD. SUITE # 202, #203  
City-St-Zip: PEMBROKE PINES, FL 33029

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: MARIA MEZCUA

OWNE

02/18/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date