## 19600063779

(Requestor's Name)		
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SECRETARY OF STATE

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: JACK H. BRENNER, D.D.S., P.A.
The second secon
SUBJECT: JACK H. BRENNER, D.D.S., P.A. (Name of corporation)
(Maine of Corporation)
DOCUMENT NUMBER: P96000063779
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JACK H. BRENNER
(Name of person)
JACK H. BRENNER, D.D.S., P.A.
(Name of firm/company)
6280 Sunset Drive, Suite 401
(Address)
South Miami, FL 33143
(City/state and zip code)
For further information concerning this matter, please call:
JACK H. BRENNER 21 305 661-5360
JACK H. BRENNER at ( 305 ) 661-5360 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:  Amendment Section  Street Address:  Amendment Section
Amendment Section Amendment Section  Division of Corporations  Division of Corporations
Division of Corporations P.O. Box 6327  Division of Corporations 409 E. Gaines Street
Tallahassee, FL 32314 Tallahassee, FL 32399

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections	607.0502, 617.0502, 607.1508, or 61		ment of	
change is submitted for a corporation	organized under the laws of the State	ofFLORIDA	in order	
to change its registered office or regist	ered agent, or both, in the State of Fl	lorida.		
1. The name of the corporation:	JACK H. BRENNER, D.D.	D.S., P.A.		
2. The principal office address:	6280 Sunset Drive, S	Suite 401		
	South Miami, FL 331	143		
3. The mailing address (if different):	6280 Sunset Drive, S	Suite 401		
<del> </del>	South Miami, FL 331	.43		
4. Date of incorporation/qualification:	07/30/1996 Document no	umber: P96000063779		
5. The name and street address of the c Florida Department of State:	urrent registered agent and registered	l office on file with the		
	STEVEN E. AMSTER	五元 5	2	
	799 Brickell Plaza,	Suite 606	2 1	
	Miami, FL 33131	E.FLO	7.7	
6. The name and street address of the n (if changed):	ew registered agent (if changed) and	/or registered office	, 0	
	PETER B. CAGLE	· .		
	6701 Sunset Drive, S	Suite 112		
	(P.O. Box or personal mailbox NOT acceptable)			
	South Miami, FL 331	.43		
The street address of its registered off changed will be identical.	ice and the street address of the bus	siness office of its registered agent	t, as	
Such change was authorized by resoluthe board, or the corporation has been	tion duly adopted by its board of d notified in writing of the change.	irectors or by an officer so author	ized by	
(Signature of an officer or direc	JACK	H. BRENNER, Preside (Printed or typed name and title)	ent	
Thereby accept the appointment as re I further agree to comply with the pro duties, and I am familiar with and acc being filed merely to reflect a change been notified in writing of this change	gistered agent and agree to act in t visions of all statutes relative to the ept the obligation of my position as in the registered office address, I h	his capacity.  proper and complete performances registered ageni. Or, if this documents confirm that the corporation	ce of my ument is n has	
(Signature of Registerell Agen		mber 20th, 2003	<del></del>	
If signing on behalf of an entity	<i>)</i>	(Date)		
(Typed or Printed Name)		(Capacity)		

\* \* \* FILING FEE: \$35.00 \* \* \*