## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000077443

Entity Name: FRANLIX FAMILY DENTAL CENTRE, P.A.

FILED Jun 26, 2012 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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320 SOUTHWEST 109 AVENUE 310 SOUTHWEST 109 AVENUE

MIAMI, FL 33174 MIAMI, FL 33174

Current Mailing Address: New Mailing Address:

9260 SOUTHWEST 42 TERRACE MIAMI, FL 33165

FEI Number: 65-0781270 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:

AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES, FL 33134 US

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

## **OFFICERS AND DIRECTORS:**

Title: PSTD

Name: ARENAL, FRANLIX
Address: 9260 S.W. 42ND TERRACE

City-St-Zip: MIAMI, FL 33165

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: FRANLIX ARENAL DR. 06/26/2012