

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000077218

FILED
Jan 13, 2011
Secretary of State

Entity Name: PEMBROKE PINES DENTAL HEALTH CENTER, P.A.

Current Principal Place of Business:

1806 NORTH FLAMINGO ROAD
SUITE 170
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

1806 NORTH FLAMINGO ROAD
SUITE 170
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 65-0865914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEIN, BRENT D
701 BRICKEL AVENUE
SUITE 1900
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: PD
Name: ERRO, JUAN C DDS
Address: 1851 N.W. 125 AVE., STE. 170
City-St-Zip: PEMBROKE PINES, FL 33028

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: JCE

P

01/13/2011

Electronic Signature of Signing Officer or Director

Date