

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000067319

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** CHILDREN'S DENTAL CENTER OF KENDALL, P.A.

**Current Principal Place of Business:**

7887 NO KENDALL DRIVE  
STE 200  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

13195 SW 134 STREET  
2ND FLOOR  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 65-0937431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INTERAMERICAN CORPORATE SERVICES LLC  
2525 PONCE DE LEON BLVD.  
SUITE 1225  
MIAMI, FL 33134 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: CEO  
Name: GOBER, MELVYN S  
Address: 13195 SW 134 STREET 2ND FLOOR  
City-St-Zip: MIAMI, FL 33186

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: MELVYN S. GOBER

CEO

04/24/2012

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

\_\_\_\_\_  
Date