

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P99000076914

**FILED**  
**Oct 25, 2010**  
**Secretary of State**

**Entity Name:** KIP RING, D.D.S.,P.A.

**Current Principal Place of Business:**

KIP RING  
7500 NW 5TH ST, SUITE 108  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

KIP RING  
7500 NW 5TH ST, SUITE 108  
PLANTATION, FL 33317

**New Mailing Address:**

**FEI Number:** 65-0976774

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RING, KIP  
7500 NW 5TH ST  
STE. 108  
PLANTATION, FL 333172358 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:** KIP RING

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** RING, KIP  
**Address:** 7500 NW 5TH ST, SUITE 108  
**City-St-Zip:** PLANTATION, FL 333172358

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:** KIP RING

P

10/25/2010

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

\_\_\_\_\_  
Date