

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000082128

FILED
Jan 04, 2007
Secretary of State

Entity Name: STUART H. ELKIN, D.M.D., P.A.

Current Principal Place of Business:

3925 W BOYNTON BEACH BLVD
SUITE #104
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

3925 W BOYNTON BEACH BLVD
SUITE #104
BOYNTON BEACH, FL 33436

New Mailing Address:

FEI Number: 65-0949239 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELKIN, STUART H
3925 W BOYNTON BEACH BLVD
SUITE #104
BOYNTON BEACH, FL 33436 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DR () Delete
Name: ELKIN, STUART H
Address: 3925 W. BOYNTON BEACH BLD, #104
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STUART H. ELKIN

DR.

01/04/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date