

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S14106

FILED
Feb 08, 2006
Secretary of State

Entity Name: CENTRO ODONTOLOGICO COLOMBIANO, "C.O.C.", INC.

Current Principal Place of Business:

8300 W FLAGLER ST.
#160
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

8300 W FLAGLER ST.
#160
MIAMI, FL 33144

New Mailing Address:

FEI Number: 65-0235746 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ESTEFAN, MARIE EVELYN
8300 W FLAGLER ST, #160
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

ESTEFAN, EVELYN MARIE DDS
8300 W FLAGLER ST, #160
MIAMI, FL 33144 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: EVELYN ESTEFAN, DDS 02/08/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ESTEFAN, MARIE EVELY, N
Address: 3962 ADRA AVE.
City-St-Zip: MIAMI, FL 33178

Title: VSD (X) Delete
Name: SALAZAR, ALVARO,
Address: 3962 ADRA AVE.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: ESTEFAN, EVELYN MARI, E
Address: 3962 ADRA AVE.
City-St-Zip: MIAMI, FL 33178

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: EVELYN ESTEFAN, DDS PTD 02/08/2006
Electronic Signature of Signing Officer or Director Date