

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S56852

FILED
Mar 26, 2011
Secretary of State

Entity Name: SAFWAT B. ATTIA, D.D.S., P.A.

Current Principal Place of Business:

GAINESVILLE DENTAL CENTER
4000 WEST NEWBERRY ROAD
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

GAINESVILLE DENTAL CENTER
4000 WEST NEWBERRY ROAD
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 59-3095525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATTIA, SAFWAT B.
4000 WEST NEWBERRY RD
GAINESVILLE, FL 32607 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: P
Name: ATTIA, SAFWAT B.
Address: OLD TOWN SHOPPING CENTER
City-St-Zip: OLD TOWN, FL 32680

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: SAFWAT B. ATTIA

P

03/26/2011

Electronic Signature of Signing Officer or Director

Date