2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 17, 2006 08:00 AM Secretary of State

1. Entity Name	MENT # S69005 . BERLIN, D.D.S., P.A.			Secretary of State			
Principal Place 1734 S CONO PALM SPRING		Mailing Address 1734 S CONGRESS AVE. PALM SPRINGS, FL 33461		- - - - - - - - - - - - - - - - - - -	- 6 888 - 1 888 - 6 118 - 6 818 - 6 88	ATRIK AKINT AKAN MINAK AKAN MIKAKAN IN MARK	
D	O NOT WRITE	IN THIS SPA	CE	01042006 4. FEI Numbe 65-027	No Chg-P	CR2E034 (11/05) Applied For Not Applicat \$8.75 Additional	
	6. Name and Address of Current	Registered Agent	·	1		Fee Required	
PALM SPF	ONGRESS AVE. RINGS, FL 33461	IN THIS SPACE					
the obligat	named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent. E NOW!!! FEE IS \$150.00	and title if applicable (NOTE Register 9. Election Campaign Fine	red Agent algneture require	d when reinstating) 5.00 May Be	h, in the State of Flo	oate	
After Ma	ay 1, 2006 Fee will be \$550.	OO Trust Fund Contribution	i. Li Adi	ded to Fees			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVT BERLIN, SUSAN V. 1734 S CONGRESS AVE. PALM SPRINGS, FL	DIRECTORS				387 998 30060-022 150,00	
NAME STREET ADDRESS CITY-ST-ZIP							
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					THIS SF	PACE	
TITLE NAME STREET ADDRESS				Andrew Comment			

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SI	Ch	JA	TI	SR	F

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



SUSAN V. BERLIN

1-8-06

561-642.4720

Daytime Phone #