

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V38116

FILED  
Feb 25, 2010  
Secretary of State

**Entity Name:** MICHAEL RADU, D.D.S., P.A.

**Current Principal Place of Business:**

1865 NW BOCA RATON BLVD.  
SUITE 101  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

1865 NW BOCA RATON BLVD.  
SUITE 101  
BOCA RATON, FL 33432

**New Mailing Address:**

**FEI Number:** 65-0337578      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RADU, MICHAEL DR.  
1865 NW BOCA RATON BLVD.  
SUITE 101  
BOCA RATON, FL 33432 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.  
Name: RADU, MICHAEL  
Address: 1865 NW BOCA RATON BLVD., #101  
City-St-Zip: BOCA RATON, FL 33432 US

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: MICHAEL RADU

PRES

02/25/2010

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

\_\_\_\_\_ Date