2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V64010

f. Entity Name

GEORGE S. YATROS, D.M.D., P.A.



FILED Jul 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

3909 E. BAY DRIVE

3909 E. BAY DRIVE

SUITE 205

HOLMES BEACH, FL 34217 US

SUITE 205 HOLMES BEACH, FL 34217



| DO | NOT | WRITE | IN | THIS | SPACE |
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4. FEI Number Applied For 65-0354028 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional

CR2E034 (11/05)

Fee Required

6. Name and Address of Current Registered Agent

YATROS, GEORGE S 3909 E. BAY DRIVE HOLMES BEACH, FL 34217

SIGNATURE:

DO NOT WRITE IN THIS SPACE

7/12/07

Daytime Phone #

No Chg-P

07112007

| 8. The above the obligat SIGNATURE. | named entity submits this statement for the ions of registered agent. Significant, proof or ordinary name of projetared agent and significant signifi | later : | | egistéréd agent, or bo | oth, in the State of Fiorida. I am familiar with, and accept |
|---|--|---|---|--|--|
| FI D | 9. Election Campaign Financi Trust Fund Contribution. | | \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. | |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP | ÖFFICERS AND DIR DR. YATROS, GEORGE S 3909 E. BAY DRIVE HOLMES BCH, FL | ECTORS | | | U00000769599 07/19/07-80007-018 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | Mayer ougo | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby a indicated of the corchanged. | pertify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empower or on an attachment with an address, with | tiling does not qualify for the exeme and accurate and that my signatured to execute this report as required all other like empowered. | ptions cor e shall hav d by Chapi | itained in Chapter 11 te the same legal effe er 607, Florida Statuti | 9, Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if |