

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000045735

**Entity Name:** RAFAEL M. PALAGANAS, D.D.S., P.A.

**Current Principal Place of Business:**

8201 113TH STREET N.  
SEMINOLE, FL 33772

**FILED**  
**Apr 18, 2013**  
**Secretary of State**  
**CC9517064829**

**Current Mailing Address:**

8201 113TH STREET N.  
SEMINOLE, FL 33772

**FEI Number: 59-3384853**

**Certificate of Status Desired: No**

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

PALAGANAS, RAFAEL M  
8201 113TH STREET N  
SEMINOLE, FL 33772 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            DIR  
Name            PALAGANAS, RAFAEL M  
Address        8201 113 ST N  
City-State-Zip: SEMINOLE FL 33772

*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: RAFAEL M PALAGANAS DDS**

**PRESIDENT**

**04/18/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date