

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000127993

**FILED
Apr 29, 2011
Secretary of State**

Entity Name: PREMIERE DENTAL CARE, PL

Current Principal Place of Business:

600 SOUTH DIXIE HIGHWAY
SUITE NO. 105
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

600 SOUTH DIXIE HIGHWAY
SUITE NO. 105
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 27-4258449 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SHOCHET, RANDALL ESQ.
4897 JOG ROAD
GREENACRES, FL 33467 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SUNRISE DENTAL, PA
Address: 313 NORTHEAST 211 TERRACE
City-St-Zip: MIAMI, FL 33179

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SUNRISE DENTAL, PA MGRM 04/29/2011

_____ Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date