

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000165951

Entity Name: THE DENTAL PLACE INC.

FILED
Apr 26, 2012
Secretary of State

Current Principal Place of Business:

6738 WEST SUNRISE BLVD
105
PLANTATION, FL 33313

New Principal Place of Business:

Current Mailing Address:

6738 WEST SUNRISE BLVD
105
PLANTATION, FL 33313

New Mailing Address:

FEI Number: 20-3791829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, SHARON O DR.
8410 NW 46 DR
CORAL SPRINGS, FL 33067 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

OFFICERS AND DIRECTORS:

Title: P
Name: ROBINSON, SHARON O DR.
Address: 8410 NW 46 DR.
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VP
Name: ROBINSON, LORNA Y
Address: 1313 NW 15TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33311

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: SHARON ROBINSON

MGR

04/26/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date