2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2011
Secretary of State

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Entity Name: DENTAL ASSISTING INSTITUTE, INC.

Current Principal Place of Business:

4326 PARK BOULEVARD
SUITE C-WEST
PINELLAS PARK, FL 33781

New Principal Place of Business:

4326 PARK BOULEVARD
SUITE E-WEST
PINELLAS PARK, FL 33781

Current Mailing Address:

4326 PARK BOULEVARD
SUITE #C-WEST
PINELLAS PARK, FL 33781

New Mailing Address:

4326 PARK BOULEVARD
SUITE #E-WEST
PINELLAS PARK, FL 33781

FEI Number: 86-1163369 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAQUETTE, WENDY B
1897 TANGLEWOOD DR NE
ST. PETERSBURG, FL 33702 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: PAQUETTE, WENDY B
Address: 1897 TANGLEWOOD DR NE
City-St-Zip: ST. PETERSBURG, FL 33702

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: WENDY PAQUETTE PRES 04/14/2011
Electronic Signature of Signing Officer or Director Date