

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000031363

FILED
Feb 18, 2011
Secretary of State

Entity Name: KIDZONE DENTAL CARE, P.A.

Current Principal Place of Business:

11117 HOFFNER EDGE DRIVE
RIVERVIEW, FL 33579

New Principal Place of Business:

Current Mailing Address:

11117 HOFFNER EDGE DRIVE
RIVERVIEW, FL 33579

New Mailing Address:

FEI Number: 27-2370674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FALEMBAN, MOUNIKA
11117 HOFFNER EDGE DRIVE
RIVERVIEW, FL 33579 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: CEO
Name: FALEMBAN, MOUNIKA
Address: 11117 HOFFNER EDGE DRIVE
City-St-Zip: RIVERVIEW, FL 33579

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: MOUNIKA FALEMBAN

CEO

02/18/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date