2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# L07000106363

Entity Name: INNOVATION DENTISTRY, P.L.

Current Principal Place of Business:

8276 MARITIME FLAG STREET #1214
WINDERMERE, FL 34786

New Principal Place of Business:

8276 MARITIME FLAG STREET
UNIT 1214
WINDERMERE, FL 34786

Current Mailing Address:

8276 MARITIME FLAG STREET #1214
WINDERMERE, FL 34786

New Mailing Address:

8276 MARITIME FLAG STREET
UNIT 1214
WINDERMERE, FL 34786

FEI Number: 39-2067055 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH AEBEL, ERIN ESQ.
SHUMAKER, LOOP & KENDRICK LLP
101 E. KENNEDY BLVD., SUITE 2800
TAMPA, FL 33602 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: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES ( ) Change (X) Addition
Name: MELENDEZ, CARLOS H DMD
Address: 8276 MARITIME FLAG ST #1214
City-St-Zip: WINDERMERE, FL 34786

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DR. CARLOS H. MELENDEZ PRES 04/09/2008

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