

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000120229

**Entity Name:** VBBS DENTAL MANAGEMENT, INC.

**Current Principal Place of Business:**

2601 S. BAYSHORE DRIVE  
STE 760  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

2601 S. BAYSHORE DRIVE  
STE 760  
COCONUT GROVE, FL 33133

**FEI Number:** 26-0046204

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SAUNDERS, EUGENE  
11120 N. KENDALL DRIVE, SUITE 201  
MIAMI, FL 33176 US

*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

**Officer/Director Detail :**

Title DP  
Name BRAGA, VALERIA  
Address 2601 S. BAYSHORE DRIVE  
STE 760  
City-State-Zip: COCONUT GROVE FL 33133

*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:** VALERIA BRAGA

DP

01/29/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date