

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000070620

Entity Name: APOLLO BEACH DENTAL, PL

Current Principal Place of Business:

101 FLAMINGO DRIVE
SUITE D
APOLLO BEACH, FL 33572

Current Mailing Address:

101 FLAMINGO DRIVE
SUITE D
APOLLO BEACH, FL 33572 US

FEI Number: 37-1642898

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

YU, ROBERT
101 FLAMINGO DRIVE
SUITE D
APOLLO BEACH, FL 33572 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

Authorized Person(s) Detail :

Title MGRM
Name YU, ROBERT
Address 101 FLAMINGO DRIVE SUITE D
City-State-Zip: APOLLO BEACH FL 33572

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 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT J YU

PRESIDENT

01/08/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date