

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001631

Entity Name: DENTAL IMAGING TECHNOLOGIES CORPORATION

Current Principal Place of Business:

1910 NORTH PENN ROAD
HATFIELD, PA 19440

Current Mailing Address:

1910 NORTH PENN ROAD
HATFIELD, PA 19440 US

FEI Number: 51-0616037

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CHARLES A. SCHWERTNER

04/03/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LUTZ, ROBERT S.
Address 2200 PENNSYLVANIA AVE., NW SUITE
800W
City-State-Zip: WASHINGTON DC 20037

Title DIRECTOR
Name MCFADEN, FRANK T.
Address 2200 PENNSYLVANIA AVE., NW SUITE
800W
City-State-Zip: WASHINGTON DC 20037

Title PRESIDENT
Name ERIKSSON, PATRIK
Address 1910 NORTH PENN ROAD
City-State-Zip: HATFIELD PA 19440

Title TREASURER
Name MCFADEN, FRANK T.
Address 2200 PENNSYLVANIA AVE., NW SUITE
800W
City-State-Zip: WASHINGTON DC 20037

Title SECRETARY
Name O'REILLY, JAMES F.
Address 2200 PENNSYLVANIA AVE., NW SUITE
800W
City-State-Zip: WASHINGTON DC 20037

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: FRANK T. MCFADEN

TREASURER

04/03/2018

Electronic Signature of Signing Officer/Director Detail

Date