

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 605046

FILED
Jan 14, 2011
Secretary of State

Entity Name: SOUTH FLORIDA DENTISTRY FOR CHILDREN & ORTHODONTICS, P.A.

Current Principal Place of Business:

9327 W. SAMPLE ROAD
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

9327 W. SAMPLE ROAD
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-1541047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHENS, ROBERT C
9327 W. SAMPLE ROAD
CORAL SPRINGS, FL 33065 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: ROBERT C.STEPHENS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPST
Name: BENNETT, JAMES G DR.
Address: 9327 W SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: P
Name: STEPHENS, ROBERT C. DR.
Address: 9327 W SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL

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: JAMES G. BENNETT

VPST

01/14/2011

Electronic Signature of Signing Officer or Director

Date