2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731647

Entity Name: BROWARD DENTAL RESEARCH CLINIC, INC.

FILED Jan 1<u>3, 200</u>9 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

3501 S.W. DAVIE RD. BLDG 08 FT. LAUDERDALE, FL 33314

Current Mailing Address: New Mailing Address:

3501 S.W. DAVIE RD. BLDG 08 FT. LAUDERDALE, FL 33314

FEI Number: 59-1591629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DAGEN, SHELDON D 4601 SHERIDAN ST., #401 US HOLLYWOOD, FL 33021

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BLUM, MICHAEL DMD ROSENBERG, STEVEN DDS Name: Name:

Address: 648 NE 3RD AVE. Address: 648 NE 3RD AVE. FORT LAUDERDALE, FL 33304 FORT LAUDERDALE, FL 33304

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: FRIEDEL, ALAN DDS Name: BLUM, MICHAEL DMD

Address: 660 E. HALLENDALE BCH BLVD Address: 648 NE 3RD AVENUE FORT LAUDERDALE, FL 33304 City-St-Zip: HALLANDALE, FL 33009 City-St-Zip:

Title: () Delete Title: (X) Change () Addition LKIGERMAN, BARRY DDS Name: KLIGERMAN, BARRY DDS Name:

2480 E COMMERCIAL BLVD PENTHOUSE 2480 E COMMERCIAL BLVD PENTHOUSE Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308

Title: () Delete Title: ΡF (X) Change () Addition

Name: DE TURE, NICK DDS Name: DE TURE, NICK DDS 800 E. BROWARD BLVD #706 800 E. BROWARD BLVD #706 Address: Address:

City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: FORT LAUDERDALE, FL 33301

Title: () Delete Title: (X) Change () Addition ROSENBERG, STEVEN ADLER, ANDREW DMD Name: Name:

7500 NW 5TH ST., #115 3901 S. OCEAN DRIVE Address: Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: HOLLYWOOD, FL 33019

Title: () Delete Title: (X) Change () Addition CUKIER, ARNOLD DDS CUKIER, ARNOLD DDS Name: Name: Address: 9633 W. BROWARD BLVD,#2-A Address: 9633 W. BROWARD BLVD,#2-A PLANTATION, FL 33324 PLANTATION, FL 33324 City-St-Zip: City-St-Zip:

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

SIGNATURE: JOYCE ABRAHAM A D 01/13/2009