2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# K52647

Entity Name: J.P. DENTAL ENTERPRISES INC.

Current Principal Place of Business:

4440 YOWELL ROAD
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

4440 YOWELL ROAD
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 59-4805744 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FREULER, PETER J CPA
231 N JOHN YOUNG PKWY
KISSIMMEE, FL 34741 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PJEVACEVIC, JOVAN,
Address: 4440 YOWELL ROAD
City-St-Zip: KISSIMMEE, FL 34746

Title: VP ( ) Delete
Name: PJEVACEVIC, RADMILA
Address: 4440 YOWELL ROAD
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete
Name: PJEVACEVIC, MAREO
Address: 4440 YOWELL ROAD
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete
Name: PJEVACEVIC, BORXO
Address: 4440 YOWELL ROAD
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: PJEVACEVIC, MARCO
Address: 4440 YOWELL ROAD
City-St-Zip: KISSIMMEE, FL 34746

Title: D (X) Change ( ) Addition
Name: PJEVACEVIC, BORKO
Address: 4440 YOWELL ROAD
City-St-Zip: KISSIMMEE, FL 34746

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

SIGNATURE: JOVAN PJEVACEVIC P 02/25/2009

Electronic Signature of Signing Officer or Director — Date