

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032387

FILED  
Jan 31, 2004  
Secretary of State

Entity Name: WHITE WOLF DENTAL GROUP, PLC

**Current Principal Place of Business:**

1221 DUNLAUTON AVE  
PORT ORANGE, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

416 BLACK OAK LANE  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 82-6575866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VALENZI, JOSEPH DMD  
416 BLACK OAK LANE  
ORMOND BEACH, FL 32174

**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

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: VALENZI, JOSEPH DMD  
Address: 416 BLACK OAK LANE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: P ( ) Delete  
Name: OSTMETIVE DENTAL SER, VICE  
Address: 416 BLACK OAK LN  
City-St-Zip: ORMOND BEACH, FL 32174

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: DISTINCTIVE DENTAL S, ERVICE  
Address: 416 BLACK OAK LN  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: JOSEPH VALENZI D.M.D.

MGRM

01/31/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date