

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034360

Entity Name: J. KIM PERIODONTICS, LLC

FILED
Jan 15, 2007
Secretary of State

Current Principal Place of Business:

4570 CLDYE MORRIS BLVD.
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

4570 CLYDE MORRIS BLVD.
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 35-2230551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIM, JEFFREY M
4570 CLYDE MORRIS BLVD.
PORT ORANGE, FL 32129 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KIM, JEFFREY M DR.
Address: 4570 CLYDE MORRIS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JEFFREY M. KIM

MGRM

01/15/2007

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