

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065652

FILED
Mar 29, 2006
Secretary of State

Entity Name: CENTER FOR ORAL, DENTAL IMPLANT & MAXILLOFACIAL SURGERY OF TAMPA BAY, LLC

Current Principal Place of Business:

9903 TATE LN
TAMPA, FL 336265424 US

New Principal Place of Business:

8313 W. HILLSBOROUGH AVENUE
HILLSBOROUGH OFFICE PARK, SUITE 300
TAMPA, FL 33615 US

Current Mailing Address:

9903 TATE LN
TAMPA, FL 336265424 US

New Mailing Address:

3914 W. SAN NICHOLAS ST
TAMPA, FL 336296310 US

FEI Number: 20-1596431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALIENTE, ERNESTO A DMD
9903 TATE LN
TAMPA, FL 336265424 US

Name and Address of New Registered Agent:

VALIENTE, ERNESTO A DMD
3914 W SAN NICHOLAS ST.
TAMPA, FL 336296310 US

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:

03/29/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VALIENTE, ERNESTO A
Address: 9903 TATE LN
City-St-Zip: TAMPA, FL 336265424 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VALIENTE, ERNESTO A
Address: 3914 W SAN NICHOLAS ST
City-St-Zip: TAMPA, FL 336296310 US

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: ERNESTO A. VALIENTE

MGR

03/29/2006

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