2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 21, 2006
Secretary of State

DOCUMENT# L04000079083

Entity Name: DENTAL SURGERY TECHNOLOGY, LLC

Current Principal Place of Business:

1200 FLORAL SPRINGS BLVD.
APT. 17-106
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

1200 FLORAL SPRINGS BLVD.
APT. 17-106
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 20-2308363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VARGAS-MARTINEZ, LUIS O
1200 FLORAL SPRINGS BLVD.
APT. 17-106
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: MGR ( ) Delete
Name: VARGAS-MARTINEZ, LUIS O
Address: 1200 FLORAL SPRINGS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

Title: SECY ( ) Delete
Name: VARGAS-BAQUERO, LUIS
Address: 1200 FLORAL SPRINGS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition
Name: VARGAS-MARTINEZ, LUIS O
Address: 1200 FLORAL SPRINGS BLVD.
City-St-Zip: PORT ORANGE, FL 32129

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: VARGAS-MARTINEZ LUIS OSVALDO PRES 03/21/2006

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