2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# L05000120434

Entity Name: DDS CONCEPTS, LLC

Current Principal Place of Business:

6015 BENJAMIN RD
STE 310
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

6015 BENJAMIN RD
STE 310
TAMPA, FL 33634

New Mailing Address:

FEI Number: 20-3967194 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HENDEE, BRETT ESQ.
1700 S. MACDILL AVENUE
SUITE 200
TAMPA, FL 33629 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: CERESA, AMY MGR
Address: 6015 BENJAMIN RD STE 310
City-St-Zip: TAMPA, FL 33634

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CERESA, AMY
Address: 6015 BENJAMIN RD STE 310
City-St-Zip: TAMPA, FL 33634

Title: MGR ( ) Change (X) Addition
Name: MARLER, THOMAS J
Address: C/O 6015 BENJAMIN RD STE 310
City-St-Zip: TAMPA, FL 33634

Title: MGR ( ) Change (X) Addition
Name: KELLY, DONALD T
Address: C/O 6015 BENJAMIN 6015 BENJAMIN RD STE 310
City-St-Zip: TAMPA, FL 33634

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 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: DONALD KELLY MGR 04/28/2008

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