

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015297

FILED
Mar 24, 2009
Secretary of State

Entity Name: MIRROR DENTAL STUDIO LIMITED LIABILITY COMPANY

Current Principal Place of Business:

410 COUNTRY WOOD CIR.
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:
410 COUNTRY WOOD CIR.
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 20-4396511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANG, TUAN N
410 COUNTRY WOOD CIR.
LAKE MARY, FL 32746 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: DANG, TUAN N
Address: 410 COUNTRY WOOD CIR.
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES:

Title: MGR () Delete
Name: LORRENE, BRADFORD K
Address: 410 COUNTRY WOOD CIR.
City-St-Zip: LAKE MARY, FL 32746

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

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

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: TUAN DANG

MGR

03/24/2009

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