

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066427

FILED
Mar 20, 2007
Secretary of State

Entity Name: VIERA DENTAL LLC

Current Principal Place of Business:

6709 COLONNADE
SUITE 101
VIERA, FL 32940

New Principal Place of Business:

6709 COLONNADE AVE
SUITE 101
VIERA, FL 32940

Current Mailing Address:

6709 COLONNADE
SUITE 101
VIERA, FL 32940

New Mailing Address:

6709 COLONNADE AVE
SUITE 101
VIERA, FL 32940

FEI Number: 61-1512763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKS, HAROLD L JR
6709 COLONNADE
SUITE 101
VIERA, FL 32940 US

Name and Address of New Registered Agent:

BROOKS, HAROLD L JR
6709 COLONNADE AVE
SUITE 101
VIERA, FL 32940 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: _____

03/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BROOKS, HAROLD L JR
Address: 6709 COLONNADE SUITE 101
City-St-Zip: VIERA, FL 32940

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BROOKS, HAROLD L JR
Address: 6709 COLONNADE AVE SUITE 101
City-St-Zip: VIERA, FL 32940

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: HAROLD L BROOKS

MGR

03/20/2007

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