2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2010
Secretary of State

DOCUMENT# L06000113336

Entity Name: ELITE DENTAL, LLC

Current Principal Place of Business:

851 WEST STATE ROAD 436
SUITE 1021
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

851 WEST STATE ROAD 436
SUITE 1021
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 20-5933055 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OLMOS, RODOLFO A
841 WEST STATE ROAD 436
1021
ALTAMONTE SPRINGS, FL 32714 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: MGRM
Name: OLMOS, RODOLFO A
Address: 851 WEST STATE ROAD 436 SUITE 1021
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby 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 Statues.

SIGNATURE: RODOLFO A OLMO P 04/15/2010

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