

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L07645

FILED  
Jan 04, 2012  
Secretary of State

Entity Name: DENTAL INVISIONS, INC.

**Current Principal Place of Business:**

4408 FRANCES DR  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

4408 FRANCES DR  
DELRAY BEACH, FL 33445

**New Mailing Address:**

FEI Number: 65-0141712

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PAIGE, GREGORY F  
4408 FRANCES DR.  
DELRAY BEACH, FL F US

**Name and Address of New Registered Agent:**

PAIGE, GREGORY F  
4408 FRANCES DR.  
DELRAY BEACH, FL F 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: GREGORY PAIGE

01/04/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: PAIGE, GREGORY F.  
Address: 4408 FRANCES DR.  
City-St-Zip: DELRAY BEACH, FL 33445

Title: V  
Name: PAIGE, THAMLIDEE  
Address: 4408 FRANCES DR.  
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GREGORY PAIGE

PRES

01/04/2012

Electronic Signature of Signing Officer or Director

Date