

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089534

Entity Name: LUPU DENTAL, LLC

FILED
Apr 16, 2011
Secretary of State

Current Principal Place of Business:

14035 S CYPRESS COVE CR.
DAVIE, FL 33325 US

New Principal Place of Business:

2100 E HALLANDALE BCH BLVD
SUITE 304
HALLANDALE, FL 33009 US

Current Mailing Address:

14035 S CYPRESS COVE CR.
DAVIE, FL 33325 US

New Mailing Address:

FEI Number: 26-3410431 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUPU, AIDA
14035 S CYPRESS COVE CR.
DAVIE, FL 33325 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
Name: LUPU, AIDA
Address: 14035 S CYPRESS COVE CR.
City-St-Zip: DAVIE, FL 33325 US

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 Statutes.

SIGNATURE: AIDA LUPU

DR

04/16/2011

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