

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100014

FILED
Jan 30, 2009
Secretary of State

Entity Name: VIVID SMILES WHITENING ,LLC

Current Principal Place of Business:

512 N. HARBOR CITY BLVD
MELBOURNE, FL 32935

New Principal Place of Business:

4270 MINTON RD STE 114
WEST MELBOURNE, FL 32904

Current Mailing Address:

512 N. HARBOR CITY BLVD
MELBOURNE, FL 32935

New Mailing Address:

4270 MINTON RD STE 114
WEST MELBOURNE, FL 32904

FEI Number: 26-3596938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLUB, GEOFFREY P
512 N. HARBOR CITY BLVD
MELBOURNE, FL 32935 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: GOSS, SUZANNE H
Address: 1219 DEGGEN CT NW
City-St-Zip: PALM BAY, FL 32907

Title: MGR () Delete
Name: PARRISH, ALAN S
Address: 1219 DEGGEN CT NW
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES:

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: SUZANNE GOSS

MGR

01/30/2009

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