

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000100014

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** VIVID SMILES WHITENING ,LLC

**Current Principal Place of Business:**

4270 MINTON RD STE 114  
WEST MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

4270 MINTON RD STE 114  
WEST MELBOURNE, FL 32904

**New Mailing Address:**

**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  
**Name:** GOSS, SUZANNE H  
**Address:** 1219 DEGGEN CT NW  
**City-St-Zip:** PALM BAY, FL 32907

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

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:** SUZANNE H. GOSS

MGR

02/23/2010

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