2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: IMPLANT DENTAL GROUP OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

1000 45TH STREET
UNIT #3
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

8136 OKEECHOBEE BLVD.
UNIT #B
WEST PALM BEACH, FL 33407 US

Current Mailing Address:

1000 45TH STREET
UNIT #3
WEST PALM BEACH, FL 33407 US

New Mailing Address:

8136 OKEECHOBEE BLVD.
UNIT #B
WEST PALM BEACH, FL 33407 US

FEI Number: 27-2395189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNS, JACKIE C
1000 45TH STREET
UNIT #3
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

JOHNS, JACKIE C
8136 OKEECHOBEE BLVD.
UNIT #B
WEST PALM BEACH, FL 33407 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: 04/11/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: JOHNS, JACKIE C DMD
Address: 8136 OKEECHOBEE BLVD. SUITE #B
City-St-Zip: WEST PALM BEACH, FL 33407 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 Statues.

SIGNATURE: JACKIE C. JOHNS, DMD MGR 04/11/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date