

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000047994

FILED
Apr 11, 2012
Secretary of State

Entity Name: IMPLANT RESTORATIONS OF FLORIDA, LLC

Current Principal Place of Business:

128 S. HWY., 17-92
DEBARY, FL 32713 US

New Principal Place of Business:

Current Mailing Address:

128 S. HWY., 17-92
DEBARY, FL 32713 US

New Mailing Address:

FEI Number: 27-2514121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THORN, MICHAEL
180 PARKVIEW DR
ORANGE CITY, FL 32763 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: MGRM
Name: THORN, MICHAEL
Address: 128 S. HWY., 17-92
City-St-Zip: DEBARY, FL 32713 US

Title: MGR
Name: THORN, JOANNE M
Address: 180 PARKVIEW DR
City-St-Zip: ORANGE CITY, FL 32763 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: MICHAEL THORN

MGRB

04/11/2012

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