

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000051788

**FILED**  
**Jan 25, 2011**  
**Secretary of State**

**Entity Name:** AMERICAN SETHI SMILE CENTER LLC

**Current Principal Place of Business:**

1127 SOUTH UNIVERSITY DRIVE  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

1127 SOUTH UNIVERSITY DRIVE  
PLANTATION, FL 33324

**New Mailing Address:**

**FEI Number:** 27-2958196

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NEWMAN, MICHELLE  
4900 WEST OAKLAND PK  
102  
LAUDERDALE LAKES, FL 33313 US

**Name and Address of New Registered Agent:**

SETHI, SANGEETA  
1127 SOUTH UNIVERSITY DRIVE  
PLANTATION, FL 33324 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: SANGEETA SETHI

01/25/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SETHI, SANGEETA  
Address: 1127 S UNIVERSITY DR  
City-St-Zip: PLANTATION, FL 33324

Title: MGR  
Name: SETHI, MICK  
Address: 1127 SOUTH UNIVERSITY DRIVE  
City-St-Zip: PLANTATION, FL 33324

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: SANGEETA SETHI

MGRM

01/25/2011

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