2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000007391

Entity Name: SOPHIA PARPIA, D.D.S., P.L.L.C.

FILED Apr 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

687 DOUGLAS AVENUE

ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

687 DOUGLAS AVENUE ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3608958 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

PARPIA, AMMAN 221 CAPRI COVE PLACE SANFORD, FL 32771 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 PARPIA, ASHIFA
 Name:

 Address:
 221 CAPRI COVE PLACE
 Address:

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ASHIFA PARPIA MGRM 04/18/2006