2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 16, 2011
Secretary of State

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Entity Name: ORAL FACIAL CONSULTING-I, LLC

Current Principal Place of Business:

436 HOLIDAY DR.
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

436 HOLIDAY DR.
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: 04-3729113 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAYTON, KEVIN L DDS
436 HOLIDAY DR.
HALLANDALE, FL 33009 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: DRESE CONSULTING, INC.
Address: 15476 NW 77 COURT, #709
City-St-Zip: HIALEAH, FL 33016

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: KEVIN L. PAYTON MGRM 03/16/2011

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