

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M50642

FILED  
May 08, 2009  
Secretary of State

Entity Name: UNIVERSAL DENTAL CLINIC, INC.

## Current Principal Place of Business:

432 N.W. 12TH AVENUE  
MIAMI, FL 33128

## New Principal Place of Business:

432 NW 12TH AVENUE  
MIAMI, FL 33128

## Current Mailing Address:

432 N.W. 12TH AVENUE  
MIAMI, FL 33128

## New Mailing Address:

C/O LOPEZ ACCOUNTING  
1800 W 49TH STREET, STE 201  
HIALEAH, FL 33012 US

FEI Number: 59-2818103

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONTERO, OSVALDO  
432 N.W. 12 AVE.  
MIAMI, FL 33128 US

## Name and Address of New Registered Agent:

MONTERO, OSVALDO  
432 NW 12 AVENUE  
MIAMI, FL 33128 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: OSVALDO MONTERO

05/08/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: MONTERO, RICARDO  
Address: 432 N.W. 12 AVE.  
City-St-Zip: MIAMI, FL 33128

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: MONTERO, RICARDO  
Address: 432 NW 12 AVENUE  
City-St-Zip: MIAMI, FL 33128

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OSVALDO MONTERO

DPT

05/08/2009

Electronic Signature of Signing Officer or Director

Date