2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001922

Entity Name: SUNSHINE SMILES, INC.

FILED Apr 25, 2005 Secretary of State

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

4642 RIVERWALK VILLAGE COURT PONCE INLET, FL 32127

Current Mailing Address: New Mailing Address:

4642 RIVERWALK VILLAGE COURT PONCE INLET, FL 32127

FEI Number: 54-2148044 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BUNETTA, REBECCA J 4642 RIVERWALK VILLAGE COURT PONCE INLET, FL 32127 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: BUNETTA, REBECCA H Name: BUNETTA, REBECCA

Address: 4642 RIVERWALK VILLAGE COURT Address: 4642 RIVERWALK VILLAGE COURT

City-St-Zip: PONCE INLET, FL 32127 City-St-Zip: PONCE INLET, FL 32127

Title: V () Delete Title: V (X) Change () Addition

Name: BUNETTA, THERESA J Name: BUNETTA, THERESA J

 Address:
 8119 NW 17 MANOR
 Address:
 5302 NW 66TH AVE.

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:
 CORAL SPRINGS, FL 33067

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MURPHY, KATE
 Name:
 MURPHY, KATE

 Address:
 8119 NW 17 MANOR
 Address:
 5302 NW 66TH AVE.

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:
 CORAL SPRINGS, FL 33067

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REBECCA J. BUNETTA PRES 04/25/2005