

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31509

FILED
Jan 26, 2011
Secretary of State

Entity Name: LATIN AMERICAN ACADEMY OF OSEOINTEGRATED DENTAL IMPLANTS (L.A.O.D.I.) INC.

Current Principal Place of Business:

LUIS VELIS DDS
10449 NW 41 ST.
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

LUIS VELIS DDS
10449 NW 41 ST.
MIAMI, FL 33178

New Mailing Address:

FEI Number: 65-0109569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELIS, LUIS A TREASUR
10449 NW 41 ST.
MIAMI, FL 33178 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

OFFICERS AND DIRECTORS:

Title: PDT
Name: PERELLO, ROXANA PRESIDE
Address: 6917 MIRAMAR PKWY
City-St-Zip: MIRAMAR, FL 33023

Title: VP
Name: BALLADARES, JORGE VICE PR
Address: 8420 WEST FLAGLER ST.
City-St-Zip: MIAMI, FL 33144

Title: TD
Name: VELIS, LUIS A TREASUR
Address: 10449 NW 41 ST.
City-St-Zip: MIAMI, FL 33178

Title: COMM
Name: CARVAJAL, IRVING COMMISS
Address: 10114 SW 107 AVE.
City-St-Zip: MIAMI, FL 33176

I hereby 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 all other like empowered.

SIGNATURE: LUIS A. VELIS

DR.

01/26/2011

Electronic Signature of Signing Officer or Director

Date