

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057202

FILED
May 05, 2009
Secretary of State

Entity Name: PALM BEACH MALL DENTAL, INC.

Current Principal Place of Business:

146 W. 57TH STREET, APT. 41A
NEW YORK, NY 10019 US

New Principal Place of Business:

7634 FISHER ISLAND DRIVE
FISHER ISLAND, FL 33109 US

Current Mailing Address:

146 W. 57TH STREET, APT. 41A
NEW YORK, NY 10019 US

New Mailing Address:

7634 FISHER ISLAND DRIVE
FISHER ISLAND, FL 33109 US

FEI Number: 58-2572650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIKHAILOV, ALEXANDER M
2122 FISHER ISLAND DR
MIAMI BEACH, FL 33109 US

Name and Address of New Registered Agent:

MIKHAILOV, ALEXANDER M
7634 FISHER ISLAND DR
FISHER ISLAND, FL 33109 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: ALEX MIKHAILOV

05/05/2009

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: DP () Delete
Name: MIKHAILOV, ALEXANDER DDS
Address: 146 W. 57TH STREET, APT. 66B
City-St-Zip: NEW YORK, NY 10019 US

Title: DV () Delete
Name: KRACNOV, ROSTISLAV DDS
Address: 230 W. 56TH STREET, APT. 52F
City-St-Zip: NEW YORK, NY 10019 US

Title: DST () Delete
Name: VALDMAN, VADIM DDS
Address: 1830 S. OCEAN DRIVE, APT 2411
City-St-Zip: HALLANDALE, FL 33009 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MIKHAILOV, ALEXANDER
Address: 7634 FISHER ISLAND DRIVE
City-St-Zip: FISHER ISLAND, FL 33109 US

Title: VP (X) Change () Addition
Name: KRASNOV, ROSTISLAV DDS
Address: 230 W. 56TH STREET, APT. 52F
City-St-Zip: NEW YORK, NY 10019 US

Title: SECT (X) Change () Addition
Name: VALDMAN, VADIM DDS
Address: 1830 S. OCEAN DRIVE, APT 2411
City-St-Zip: HALLANDALE, FL 33009 US

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: ALEX MIKHAILOV

PRES

05/05/2009

Electronic Signature of Signing Officer or Director

Date