2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004709

KISSIMMEE, FL 34744

City-St-Zip:

Entity Name: FORTUNE DENTAL ASSOCIATES, INC.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 226 EAST NEW YORK AVENUE DELAND, FL 32724 **Current Mailing Address: New Mailing Address:** 226 EAST NEW YORK AVENUE DELAND, FL 32724 FEI Number: 59-3690707 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: GRAHAM, IVAN C VP 226 EAST NEW YORK AVENUE DELAND, FL 32724 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 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SEIFAN, GALIT Name: Name: 226 E. NEW YORK AVE Address: Address: City-St-Zip: DELAND, FL 32724 City-St-Zip: () Delete Title: VSD Title: (X) Change () Addition GRAHAM, IVAN C Name: GRAHAM, IVAN C Name: 2324 FORTUNE RD Address: 226 EAST NEW YORK AVENE Address:

DELAND, FL 32724

City-St-Zip:

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: IVAN GRAHAM VST 05/01/2009