2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000051756

Entity Name: SUNNY SMILES, INC.

Current Principal Place of Business:

420 LINCOLN ROAD SUITE 215
MIAMI BEACH, FL 32139

New Principal Place of Business:

5201 NORTH BAY ROAD
MIAMI BEACH, FL 33140

Current Mailing Address:

420 LINCOLN ROAD SUITE 215
MIAMI BEACH, FL 32139

New Mailing Address:

5201 NORTH BAY ROAD
MIAMI BEACH, FL 33140

FEI Number: 02-0559541 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAY, SCOTT R
1575 IVES DAIRY ROAD
MIAMI, FL 33179 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BACHEIKOV, ZALMAN
Address: 420 LINCOLN ROAD SUITE 215
City-St-Zip: MIAMI BEACH, FL 32139

Title: D ( ) Delete
Name: BACHEIKOV, ADA
Address: 420 LINCOLN ROAD SUITE 215
City-St-Zip: MIAMI BEACH, FL 32139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BACHEIKOV, ZALMAN
Address: 5201 NORTH BAY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Change ( ) Addition
Name: BACHEIKOV, ADA
Address: 5201 NORTH BAY ROAD
City-St-Zip: MIAMI BEACH, FL 33140

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ZALMAN BACHEIKOV D 04/10/2002

Electronic Signature of Signing Officer or Director Date