

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000074293

FILED
Mar 28, 2012
Secretary of State

Entity Name: MONDEL DENTAL ASSOCIATES, INC.

Current Principal Place of Business:

7230 SO. U. S. HIGHWAY 1
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

7230 SO. U. S. HIGHWAY 1
PORT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: 65-1145809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTEQUIN, ANTONIO A
334 NE FLORESTA DR
PORT ST LUCIE, FL 39483 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: P
Name: MONTEQUIN, ANTONIO A
Address: 334 NE FLORESIA DR
City-St-Zip: PORT ST LUCIE, FL 34983

Title: S
Name: DEL ROSARIO, GILDA
Address: 5846 DREAM COURT
City-St-Zip: PORT ST LUCIE, FL 34682

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

SIGNATURE: ANTONIO A. MONTEQUIN

P

03/28/2012

Electronic Signature of Signing Officer or Director

Date