

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000110759

FILED
Jan 31, 2004
Secretary of State

Entity Name: DISTINCTIVE DENTAL SERVICES, P.A.

Current Principal Place of Business:

1221 DUNLAWTON AVE.
PORT ORANGE, FL 32127

New Principal Place of Business:

416 BLACK OAK LANE
ORMOND BEACH, FL 32174

Current Mailing Address:

416 BLACK OAK LANE
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3757928 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALENZI, JOSEPH
416 BLACK OAK LANE
ORMOND BEACH, FL 32174

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALENZI, JOSEPH
Address: 416 BLACK OAK LANE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSEPH VALENZI D.M.D.

P

01/31/2004

Electronic Signature of Signing Officer or Director

_____ Date