2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000012131

Entity Name: DENTAL HYGIENE ONSITE INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

224 DATURA STREET 13833 WELLINGTON TRACE SUITE 700 E4

WEST PALM BEACH, FL 33401 WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

224 DATURA STREET 13833 WELLINGTON TRACE SUITE 700 E4

WEST PALM BEACH, FL 33401 WELLINGTON, FL 33414

FEI Number: 56-2337448 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:

ROBERT ADLER
224 DATURA STREET
SUITE 700
WEST PALM BEACH, FL 33401 US
ROBERT ADLER
13833 WELLINGTON TRACE
E4
WELLINGTON, FL 33414 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: 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: ADLER, ROBERT Name: ADLER, ROBERT

Address: 224 DATURA STREET, STE 700 Address: 13833 WELLINGTON TRACE, E4 City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WELLINGTON, FL 33414

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: ROBERT ADLER DIR 04/28/2005