2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2012
Secretary of State

DOCUMENT# P03000037558

Entity Name: ADVANCED DENTAL CARE AND COSMETICS,INC

Current Principal Place of Business:

1019 CROSSPOINTE DRIVE
SUITE 2
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

1019 CROSSPOINTE DRIVE
SUITE 2
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 16-1660223 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMINI, SIMON
1019 CROSSPOINT DR SUITE 2
NAPLES, FL 34110 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: MGR
Name: FARRUGIA, ALAN
Address: 1019 CROSSPOINTE DRIVE, SUITE 2
City-St-Zip: NAPLES, FL 34110

Title: MGR
Name: AMINI, SIMON
Address: 1019 CROSSPOINTE DRIVE, SUITE 2
City-St-Zip: NAPLES, FL 34110

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: ALAN FARRUGIA MGR 03/29/2012

Electronic Signature of Signing Officer or Director Date