## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000079530

Entity Name: DENTERSCAN DIAGNOSTIC RADIOLOGIC SERVICES, INC.

FILED Feb 22, 2006 Secretary of State

| Current Principal Place of Business:  |   |                                       |           | New Principal Place of Business:  |                             |  |       |
|---|---|---------------------------------------|-----------|---|-----------------------------|--|-------|
| 1802 NW 78TH WAY<br>HOLLYWOOD, FL 33024   |   |                                       |           | 4700 SHERIDAN STREET<br>SUITE B<br>HOLLYWOOD, FL 33021                            |                             |  |       |
| Current Mailing Address:  |   |                                       |           | New Mailing Address:  |                             |  |       |
| 1802 NW 78TH WAY<br>HOLLYWOOD, FL 33024   |   |                                       |           | 4700 SHERIDAN STREET<br>SUITE B<br>HOLLYWOOD, FL 33021                            |                             |  |       |
| FEI Number:   | 42-1638481  | FEI Number Applied For ( )            | FEI Nun   | nber Not Appl   | icable ( )                  | Certificate of Status Desired (  | K)    |
| Name and  | Address of Cu   | ırrent Registered Agent:              |           | Name and  | Address of                  | New Registered Agent:  |       |
| DARE, AKINTADE O<br>1802 NW 78TH WAY<br>HOLLYWOOD, FL 33024 US                    |   |                                       |           | DARE, AKINTADE O DR.<br>4700 SHERIDAN STREET<br>SUITE B<br>HOLLYWOOD, FL 33021 US |                             |  |       |
|   | named entity so<br>e of Florida.                          | ubmits this statement for the pu      | irpose o  | f changing it   | ts registered               | office or registered agent, or   | both, |
| SIGNATURE: AKINTADE O. DARE   |   |                                       |           | 02/22/2006  |                             |  |       |
|   | Electronic  | Signature of Registered Ager          | nt        |   |                             | Date   |       |
|   |   | (2)(b), F.S., the corporation did not | receive t | he prior notic  | e.                          |  |       |
| Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS: |   |                                       |           | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:                                      |                             |  |       |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | D () I<br>DARE, AKINTAD<br>1802 NW 78TH V<br>HOLLYWOOD, F | VAY                                   |           | Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | DARE, AKINTA<br>4700 SHERID |  |       |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | 1()   | Delete                                |           | Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | SOTO, ERNIE<br>100 N.W. 82N | ) Change (X) Addition<br>F DR.<br>D AVENUE, SUITE 203<br>FL 33324 US                 |       |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | 1()   | Delete                                |           | Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | CAREW, MUD<br>2301 N. UNIVE | ) Change (X) Addition<br>ASHIRU DR.<br>ERSITY DRIVE, SUITE 202<br>PINES, FL 33024 US |       |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | 1()   | Delete                                |           | Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | ADENIRAN, AI<br>4700 SHERID | ) Change (X) Addition<br>DESHOLA DR.<br>AN STREET, SUITE B<br>), FL 33021 US         |       |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | 1()   | Delete                                |           | Title:<br>Name:<br>Address:<br>City-St-Zip:                                       | GODFREY, D                  | RAL AVENUE, SUITE 209A   |       |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: | DR. AKINTADE O. DARE | CEO | 02/22/2006 |
|------------|----------------------|-----|------------|