

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000081199

Entity Name: PEDIATRIC SMILES, INC.

FILED
May 20, 2011
Secretary of State

Current Principal Place of Business:

2262 DUNN AVE STE 4
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 26948
JACKSONVILLE, FL 32226

New Mailing Address:

FEI Number: 20-1005924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALL, TANYA C
1124 VICTORY LAKE DRIVE
JACKSONVILLE, FL 32221 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: PD
Name: WALL, TANYA C
Address: P. O. BOX 26948
City-St-Zip: JACKSONVILLE, FL 32226

Title: VD
Name: SUGGS, STACI M
Address: P. O. BOX 26948
City-St-Zip: JACKSONVILLE, FL 32226

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: TANYA WALL NUNN, DDS

DDS

05/20/2011

Electronic Signature of Signing Officer or Director

Date