

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000083572

FILED  
Apr 06, 2005  
Secretary of State

Entity Name: MOBILE DENTAL SERVICE, INC.

## Current Principal Place of Business:

3901 SW 47TH AVE  
414  
DAVIE, FL 33314

## New Principal Place of Business:

3711 SW 47TH AVE  
202  
DAVIE, FL 33314

## Current Mailing Address:

3901 SW 47TH AVE  
414  
DAVIE, FL 33314

## New Mailing Address:

3711 SW 47TH AVE  
202  
DAVIE, FL 33314

FEI Number: 20-1167930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ, DAVID A  
5052 NW 123 AVE  
CORAL SPRINGS, FL 33076 US

## Name and Address of New Registered Agent:

LOPEZ, DAVID A  
3711 SW 47TH AVE  
DAVIE, FL 33314 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:

04/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PARKER, MICHAEL A  
Address: 2010 NW 99TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP ( ) Delete  
Name: MOLINA, LUIS C  
Address: 2010 NW 99TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: TRE ( ) Delete  
Name: LOPEZ, DAVID A  
Address: 5052 NW 123 AVE  
City-St-Zip: CORAL SPRINGS, FL 33076

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DAVID LOPEZ

TRE

04/06/2005

Electronic Signature of Signing Officer or Director

Date