2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# P04000083572

Entity Name: MOBILE DENTAL SERVICE, INC.

Current Principal Place of Business:

3711 SW 47TH AVE
202
DAVIE, FL 33314

New Principal Place of Business:

7605 DAVIE ROAD EXT
DAVIE, FL 33024

Current Mailing Address:

3711 SW 47TH AVE
202
DAVIE, FL 33314

New Mailing Address:

7605 DAVIE ROAD EXT
DAVIE, FL 33024

FEI Number: 20-1167930 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARKER, MICHAEL
3711 SW 47TH AVE
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

PARKER, MICHAEL
7605 DAVIE ROAD EXT
DAVIE, FL 33024 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: MICHAEL PARKER 05/01/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PARKER, MICHAEL A
Address: 3000 WEST LAKE VISTA CIRCLE
City-St-Zip: DAVIE, FL 33328

Title: VP ( ) Change (X) Addition
Name: MOLINA, LUIS C
Address: 9075 SOUTHERN ORCHARD RD SOUTH
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL PARKER P 05/01/2008
Electronic Signature of Signing Officer or Director Date