2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097982

Entity Name: DENTAL GROUP ASSOCIATES, PA

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1249 N. STATE ROAD 7 LAUDERHILL, FL 33313

Current Mailing Address: New Mailing Address:

10800 AVENIDA DEL RIO 1249 N. STATE ROAD 7 DELRAY BEACH, FL 33446 LAUDERHILL, FL 33313

FEI Number: 20-1327329 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEIN, ILYA STEIN, ILYA DMD
1249 N. STATE ROAD 7
LAUDERHILL, FL 33313 US
STEIN, ILYA DMD
1249 N. STATE ROAD 7
LAUDERHILL, FL 33313 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: ILYA STEIN 01/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 STEIN, ILYA
 Name:
 STEIN, ILYA DMD

 Address:
 1249 N. STATE ROAD 7
 Address:
 1249 N. STATE ROAD 7

 City-St-Zip:
 LAUDERHILL, FL 33313
 City-St-Zip:
 LAUDERHILL, FL 33313

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: ILYA STEIN P 01/16/2009