

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120980

FILED
Mar 10, 2005
Secretary of State

Entity Name: ABSOLUTE DENTAL IMAGE, INC.

Current Principal Place of Business:

445 BAHAMA DR.
INDIALANTIC, FL 32903

New Principal Place of Business:

870 N. MIRAMAR AVE.
SUITE 1203
INDIALANTIC, FL 32903 US

Current Mailing Address:

445 BAHAMA DR.
INDIALANTIC, FL 32903

New Mailing Address:

870 N. MIRAMAR AVE.
SUITE 1203
INDIALANTIC, FL 32903 US

FEI Number: 20-1550117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, JAMES H
445 BAHAMA DR.
INDIALANTIC, FL 32903 US

Name and Address of New Registered Agent:

CLARK, JAMES H
870 N. MIRAMAR AVE.
SUITE 1203
INDIALANTIC, FL 32903 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:

03/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLARK, JAMES H
Address: 445 BAHAMA DR.
City-St-Zip: INDIALANTIC, FL 32903 US

Title: VP (X) Delete
Name: ABSOLUTE DENTAL IMAG, E, LLC
Address: 122 FOURTH AVE.
City-St-Zip: INDIALANTIC, FL 32903 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLARK, JAMES H
Address: 870 N. MIRAMAR AVE., SUITE 1203
City-St-Zip: INDIALANTIC, FL 32903 US

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: JAMES H. CLARK

P

03/10/2005

Electronic Signature of Signing Officer or Director

Date