

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000039179

Entity Name: DENTAL DEVELOPMENT, INC.

FILED  
Jul 14, 2006  
Secretary of State

## Current Principal Place of Business:

2641 NE 186TH TERR.  
MIAMI, FL 33180

## New Principal Place of Business:

1360 NE 172 ST  
N. MIAMI BEACH, FL 33162

## Current Mailing Address:

2641 NE 186TH TERR.  
MIAMI, FL 33180

## New Mailing Address:

1360 NE 172 ST  
N. MIAMI BEACH, FL 33162

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

ATKIN, BENJAMIN B PRESIDE  
1360 NE 172 STREET  
N. MIAMI BEACH, FL 33162 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: BENJAMIN B. ATKIN

07/14/2006

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: PD ( ) Delete  
Name: ATKIN, BENJAMIN  
Address: 2641 NE 186TH TERR.  
City-St-Zip: MIAMI, FL 33180

Title: STD ( ) Delete  
Name: MILLIKEN, RALPH A  
Address: 2641 NE 186TH TERR.  
City-St-Zip: MIAMI, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: BENJAMIN B. ATKIN

PD

07/14/2006

Electronic Signature of Signing Officer or Director

Date