

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000061236

FILED  
Apr 14, 2010  
Secretary of State

**Entity Name:** PRECISION DENTAL RESTORATIONS, INC.

**Current Principal Place of Business:**

5109 NW 39TH AVENUE  
SUITE G  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

5109 NW 39TH AVENUE  
SUITE G  
GAINESVILLE, FL 32606

**New Mailing Address:**

FEI Number: 20-2746446      FEI Number Applied For (  )      FEI Number Not Applicable (  )      Certificate of Status Desired (  )

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

JOSEPH, ERIC M  
3153 NW 12TH STREET  
GAINESVILLE, FL 32609      US

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

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:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution (  ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: JOSEPH, ERIC M  
Address: 3153 NW 12TH STREET  
City-St-Zip: GAINESVILLE, FL 32609

Title: D  
Name: MOORE, PHILIP C  
Address: 3805 NW 50TH STREET  
City-St-Zip: GAINESVILLE, FL 32606

Title: D  
Name: DANIEL, SALENA R  
Address: 8401 NW 13 ST, LOT 18  
City-St-Zip: GAINESVILLE, FL 32653

I hereby 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 all other like empowered.

SIGNATURE: ERIC M. JOSEPH

D

04/14/2010

Electronic Signature of Signing Officer or Director

Date