

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104700

Entity Name: TOWER DENTAL, INC.

FILED  
Apr 22, 2008  
Secretary of State

**Current Principal Place of Business:**

27400 RIVERVIEW CENTER BLVD  
SUITE 8  
BONITA SPRINGS, FL 34134 US

**Current Mailing Address:**

27400 RIVERVIEW CENTER BLVD  
SUITE 8  
BONITA SPRINGS, FL 34134 US

FEI Number: 04-3821479

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUCK, HERBERT J  
5405 JAEGER ROAD  
NAPLES, FL 34109 US

**New Principal Place of Business:**

27400 RIVERVIEW CENTER BLVD  
BUILDING 8 SUITE 8  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

27400 RIVERVIEW CENTER BLVD  
BUILDING 8 STE 8  
BONITA SPRINGS, FL 34134 US

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

ROCHA, SONIA A  
27400 RIVERVIEW CENTER BLVD  
BUILDING 8 STE 8  
BONITA SPRINGS, FL 34134 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: SONIA J. ROCHA

04/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: ROCHA, SONIA A  
Address: 1443 HEMMINGWAY PLACE  
City-St-Zip: NAPLES, FL 34103 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SONIA J. ROCHA

PTD

04/22/2008

Electronic Signature of Signing Officer or Director

Date