

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106817

FILED
Apr 24, 2012
Secretary of State

Entity Name: DENTAL DESIGN SERVICES, P.A.

Current Principal Place of Business:

17140 ROYAL PLAM BLVD #2
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

17140 ROYAL PLAM BLVD #2
WESTON, FL 33326

New Mailing Address:

FEI Number: 20-3291498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONILLA, JAVIER
4305 VINEYARD CIR
WESTON, FL 33332 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

OFFICERS AND DIRECTORS:

Title: DPS
Name: BONILLA, JAVIER E
Address: 4305 VINEYARD CIR
City-St-Zip: WESTON, FL 33332

Title: DVT
Name: IZQUIERDO, CLAUDIA E
Address: 4305 VINEYARD CIR
City-St-Zip: WESTON, FL 33332

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: CLAUDIA IZQUIERDO

DVT

04/24/2012

Electronic Signature of Signing Officer or Director

Date