2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 10, 2006
Secretary of State

DOCUMENT# P05000126352

Entity Name: COSMETIC DENTISTRY & FACIAL ESTHETICS, OF NAPLES, INC.

Current Principal Place of Business:

4077 TAMIAMI TRAIL NORTH
SUITE D202
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

4077 TAMIAMI TRAIL NORTH
SUITE D202
NAPLES, FL 34103

New Mailing Address:

FEI Number: 90-0248215 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 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 ( ) Delete
Name: MARDER, ALAN M
Address: 4077 TAMIAMI TRAIL NORTH, SUITE D203
City-St-Zip: NAPLES, FL 34103

Title: DIR (X) Delete
Name: COX, JR., MICHELLE
Address: 4077 TAMIAMI TRAIL NORTH, SUITE D202
City-St-Zip: NAPLES, FL 34103

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: ALAN M MARDER DPS 08/10/2006
Electronic Signature of Signing Officer or Director Date