

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000039801

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** SORRISO BELLO DENTAL, P.A.

**Current Principal Place of Business:**

5345 3RD STREET  
ZEPHYRHILLS, FL 33542

**New Principal Place of Business:**

**Current Mailing Address:**

20131 HERITAGE POINT DRIVE  
TAMPA, FL 33647

**New Mailing Address:**

20010 LOMOND LANE  
TAMPA, FL 33647

**FEI Number:** 20-4525675

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLAYTON, ARIANA R  
20131 HERITAGE POINT DRIVE  
TAMPA, FL 33647 US

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

CLAYTON, ARIANA R  
20010 LOMOND LANE  
TAMPA, FL 33647 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:** ARIANA CLAYTON

02/23/2010

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** DELLE-DONNE, VINCENT A PRES  
**Address:** 20131 HERITAGE POINT DRIVE  
**City-St-Zip:** TAMPA, FL 33647

**Title:** SEC  
**Name:** CLAYTON, ARIANA R SEC  
**Address:** 20131 HERITAGE POINT DRIVE  
**City-St-Zip:** TAMPA, FL 33647

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:** ARIANA CLAYTON

SEC

02/23/2010

Electronic Signature of Signing Officer or Director

Date