2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2012
Secretary of State

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Entity Name: SAWGRASS MILLS MALL DENTAL, P.A.

Current Principal Place of Business:

12801 WEST SUNRISE BLVD SUITE F222
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

C/O ROSTISLAV KRASNOV DDC
230 W 56TH STREET, APT 52F
NEW YORK, NY 10019

New Mailing Address:

12801 WEST SUNRISE BLVD SUITE F222
SUNRISE, FL 33323

FEI Number: 51-0633779 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALDMAN, VADIM
1830 SOUTH OCEAN DRIVE APT 2411
HALLANDALE, FL 330095 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: DP
Name: KRASNOV, ROSTISLAV DDS
Address: 230 W 56TH STREET, AP 52F
City-St-Zip: NEW YORK, NY 10019

Title: DVST
Name: VALDMAN, VADIM DDS
Address: 1830 SOUTH OCEAN DRIVE, APT 2411
City-St-Zip: HALLANDALE, FL 33009

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: ROSTISLAV KRASNOV PRES 02/09/2012

Electronic Signature of Signing Officer or Director — Date