

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000145307

Entity Name: SMILE DENTAL DESIGN , INC

FILED
Feb 21, 2011
Secretary of State

Current Principal Place of Business:

9 SW 17TH STREET
FORT LAUDERDALE, FL 33315

New Principal Place of Business:

Current Mailing Address:

9 SW 17TH STREET
FORT LAUDERDALE, FL 33315

New Mailing Address:

FEI Number: 41-2220291

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIRALDO, ANDREA
9 SW 17TH STREET
FORT LAUDERDALE, FL 33315 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: PD
Name: GIRALDO, ANDREA
Address: 9 SW 17TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

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: ANDREA GIRALDO

DR

02/21/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date