

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000154026

FILED  
Feb 18, 2008  
Secretary of State

Entity Name: KORENBLIT DENTAL SERVICES, INC

## Current Principal Place of Business:

9920 S GRAND DUKE CIRCLE  
TAMARAC, FL 33321 US

## New Principal Place of Business:

## Current Mailing Address:

9920 S GRAND DUKE CIRCLE  
TAMARAC, FL 33321 US

## New Mailing Address:

FEI Number: 20-8048602

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PREMIER FINANCIAL SERVICES GROUP, INC.  
5649 NW 84TH TERR  
TAMARAC, FL 33351 US

## Name and Address of New Registered Agent:

KORENBLIT, IGOR VP  
9920 S GRAND DUKE CIR  
TAMARAC, FL 33321 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: IGOR KORENBLIT

02/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ROYZMAN, ANNA  
Address: 9920 S GRAND DUKE CIRCLE  
City-St-Zip: TAMARAC, FL 33321 US

Title: VP ( ) Delete  
Name: KORENBLIT, IGOR  
Address: 9920 S GRAND DUKE CIRCLE  
City-St-Zip: TAMARAC, FL 33321 US

Title: T ( ) Delete  
Name: ROYZMAN, ANNA  
Address: 9920 S GRAND DUKE CIRCLE  
City-St-Zip: TAMARAC, FL 33321 US

Title: S ( ) Delete  
Name: KORENBLIT, IGOR  
Address: 9920 S GRAND DUKE CIRCLE  
City-St-Zip: TAMARAC, FL 33321 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: IGOR KORENBLIT

VP

02/18/2008

Electronic Signature of Signing Officer or Director

Date