2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080082

Entity Name: ADVANCED DENTAL TECH, INC.

FILED May 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7871 NW 181 STREET 2214 SW 132 AVE MIAMI, FL 33015 MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

7871 NW 181 STREET 2214 SW 132 AVE MIAMI, FL 33015 MIRAMAR, FL 33027

FEI Number: 26-0531062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NORRIS, JEFFREY W
7871 NW 181 STREET
MIAMI, FL 33015 US
NORRIS, JEFFREY W
2214 SW 132 AVE
MIRAMAR, FL 33027 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: JEFFREY W NORRIS 05/20/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 NORRIS, JEFFREY W
 Name:
 NORRIS, JEFFREY W

 Address:
 7871 NW 181 STREET
 Address:
 2214 SW 132 AVE

 Address:
 7871 NW 181 STREET
 Address:
 2214 SW 132 AVE

 City-St-Zip:
 MIAMI, FL 33015
 City-St-Zip:
 MIRAMAR, FL 33027

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 NORRIS, CHRISTINA L VP

 Address:
 Address:
 2214 SW 132 AVE

 City-St-Zip:
 City-St-Zip:
 MIRAMAR, FL 33027

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: JEFFREY W NORRIS PD 05/20/2008