

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080283

FILED
Feb 17, 2011
Secretary of State

Entity Name: NATIONAL MEDICAL DENTAL TECHNOLOGIES, INC.

Current Principal Place of Business:

3722 162ND AVE E
PARRISH, FL 34219 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 769
PARRISH, FL 34219 US

New Mailing Address:

FEI Number: 26-0543189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAROON, PETER P
3722 162ND AVE E
PARRISH, FL 34219 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: PST
Name: MAROON, PETER
Address: PO BOX 769
City-St-Zip: PARRISH, FL 34219 US

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: PETER MAROON

PRES

02/17/2011

Electronic Signature of Signing Officer or Director

Date