

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000133125

FILED
Mar 23, 2011
Secretary of State

Entity Name: PONCE DENTAL CORPORATION

Current Principal Place of Business:

3190 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

3190 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 26-1677775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRUZ, FELIX
7891 W FLAGLER ST
SUITE 418
MIAMI, FL 33144 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: D
Name: LOPEZ, MANUEL G DDS
Address: 3190 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: LOPEZ, PATRICIA C
Address: 3190 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

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: MANUEL G. LOPEZ

D

03/23/2011

Electronic Signature of Signing Officer or Director

Date