2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000035988

Entity Name: SMILES FOR LIFE, P.A.

City-St-Zip: ORLANDO, FL 32809 US

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	SEL AVENUE), FL 32809	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	SEL AVENUE D, FL 32809	US			
FEI Number	: 26-2372125	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
7232 W. S SUITE 202	RS, BART R AND LAKE RO 2 D, FL 32819 U				
	named entity s e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	P () RABI, ROBBY N		Title: Name: Address:	() Change () Addition	

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: ROBBY RABI MGR. 03/12/2009