2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2011
Secretary of State

DOCUMENT# P08000058680

Entity Name: ALLCARE DENTISTRY, P.A.

Current Principal Place of Business:

11915 BEACH BLVD STE 115
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

11915 BEACH BLVD STE 115
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 24-2461127 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DO, NGUYEN T
8272 HIGHGATE DR.
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

DO, NGUYEN T
8272 HIGHGATE DR
JACKSONVILLE, FL 32216 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: 03/17/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP
Name: DO, NGUYEN T
Address: 8272 HIGHGATE DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

Title: VST
Name: TRAN, HUONG T
Address: 8272 HIGHGATE DRIVE
City-St-Zip: JACKSONVILLE, FL 32216

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: HELEN TRAN VST 03/17/2011
Electronic Signature of Signing Officer or Director Date