

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000034459

FILED  
May 20, 2010  
Secretary of State

Entity Name: UNIQUE DENTAL GROUP, INC.

**Current Principal Place of Business:**

4011 W. FLAGLER STREET  
STE 202  
MIAMI, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

4011 W. FLAGLER STREET  
STE 202  
MIAMI, FL 33134

**New Mailing Address:**

FEI Number: 26-4691027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAMIREZ, RENE  
1000 PONCE DE LEON BLVD  
STE: 101  
CORAL GABLES, FL 33134 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

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:**

Title: PD  
Name: TORRES, LISSETTE M  
Address: 1000 PONCE DE LEON BLVD., STE 101  
City-St-Zip: CORAL GABLES, FL 33134

Title: VD  
Name: RAMIREZ, RENE  
Address: 1000 PONCE DE LEON BLVD., STE 101  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: LYONS, JAMES C DDS  
Address: 4011 W. FLAGLER STREET, #202  
City-St-Zip: MIAMI, 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: RENE RAMIREZ

D

05/20/2010

Electronic Signature of Signing Officer or Director

Date