

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000063746

Entity Name: MY SMILE DENTAL, INC.

FILED  
Apr 22, 2010  
Secretary of State

**Current Principal Place of Business:**

520 48TH STREET COURT EAST  
BRADENTON, FL 34208

**New Principal Place of Business:**

**Current Mailing Address:**

443 MEADOW LARK DR  
SARASOTA, FL 34236

**New Mailing Address:**

520 48TH STREET COURT EAST  
BRADENTON, FL 34208

FEI Number: 27-0678459

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MALLERY, MARTINA  
440 MEADOW LARK DR  
SARASOTA, FL 34236 US

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

MALLERY, MARTINA D.D.S.  
520 48TH STREET COURT EAST  
BRADENTON, FL 34208 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: MARTINA MALLERY, D.D.S.

04/22/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MALLERY, MARTINA D.D.S.  
Address: 520 48TH STREET COURT EAST  
City-St-Zip: BRADENTON, FL 34208

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: MARTINA MALLERY, D.D.S.

P

04/22/2010

Electronic Signature of Signing Officer or Director

Date