

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P09000065781

FILED
Apr 08, 2013
Secretary of State

Entity Name: ESTHETIC AND IMPLANT DENTISTRY OF SOUTH FLORIDA, PA

Current Principal Place of Business:

1000 45TH ST
SUITE 3
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

8136 OKEECHOBEE BLVD
SUITE B
WEST PALM BEACH, FL 33411 US

Current Mailing Address:

1000 45TH ST
SUITE 3
WEST PALM BEACH, FL 33407 US

New Mailing Address:

8136 OKEECHOBEE BLVD
SUITE B
WEST PALM BEACH, FL 33411 US

FEI Number: 27-0690655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNS, JACKIE C
1000 45TH ST
SUITE 3
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

JOHNS, JACKIE C
8136 OKEECHOBEE BLVD
SUITE B
WEST PALM BEACH, FL 33411 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: JACKIE C JOHNS

04/08/2013

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST
Name: JOHNS, JACKIE C
Address: 8136 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33411 US

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: JACKIE C JOHNS

PST

04/08/2013

Electronic Signature of Signing Officer or Director

Date