## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000051524

Entity Name: FLORIDA DENTAL HEALTH, INC.

FILED Feb 14, 2012 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 323 NE 6TH AVE SUITE C DELRAY BEACH, FL 33483 **Current Mailing Address: New Mailing Address:** 6156 NW 31ST CT BOCA RATON, FL 33496 FEI Number: 27-2883002 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DANIEL J. ROSE, P.A. 323 NE 6TH AVE SUITE C DELRAY BEACH, FL 33483 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: Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: ROSE, ADRIAN Address: 323 NE 6TH AVE

City-St-Zip: DELRAY BEACH, FL 33483

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: ADRIAN ROSE P 02/14/2012