2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2011
Secretary of State

DOCUMENT# P93000021137

Entity Name: PALMETTO SMILE CENTER, P.A.

Current Principal Place of Business:

7150 WEST 20 AVE.
SUITE 602
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

738 CAMILO AVE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0403742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MADERAL, MARTHA
738 CAMILO AVE
SUITE 602
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

OFFICERS AND DIRECTORS:

Title: P
Name: MADERAL, MARTHA
Address: 7150 WEST 20 AVE., STE. 602
City-St-Zip: HIALEAH, FL 33016

Title: VP
Name: GARCINI, ALEXANDRIA
Address: 7150 W. 20 AVE SUITE 602
City-St-Zip: HIALEAH, FL 33016

Title: S
Name: MADERAL, RAO
Address: 7150 W 20 AVE SUITE 602
City-St-Zip: HIALEAH, FL 33016

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: MARTHA MADERAL PRES 01/28/2011

Electronic Signature of Signing Officer or Director — Date