

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000036240

FILED  
Apr 01, 2003  
Secretary of State

Entity Name: DENTAL STAFFING SOLUTIONS, INC.

## Current Principal Place of Business:

4326 PARK BLVD SUITE I  
PINELLAS PARK, FL 33781

## New Principal Place of Business:

4326 PARK BLVD  
SUITE C-WEST  
PINELLAS PARK, FL 33781

## Current Mailing Address:

4326 PARK BLVD SUITE I  
PINELLAS PARK, FL 33781

## New Mailing Address:

4326 PARK BLVD  
SUITE C-WEST  
PINELLAS PARK, FL 33781

FEI Number: 59-3237781

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PAQUETTE, WENDY B  
4326 PARK BLVD SUITE I  
PINELLAS PARK, FL 34665 US

## Name and Address of New Registered Agent:

PAQUETTE, WENDY B  
4326 PARK BLVD  
SUITE C-WEST  
PINELLAS PARK, FL 33781 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: WENDY PAQUETTE

04/01/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: T ( ) Delete  
Name: BELL, PATRICIA L  
Address: 940 MONTE CRISTO BLVD  
City-St-Zip: TIERRE VERDE, FL

Title: PS ( ) Delete  
Name: PAQUETTE, WENDY B  
Address: 6387 TANGLEWOOD DR NE  
City-St-Zip: ST PETERSBURG, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: BELL, PATRICIA L  
Address: 3451 ROCKCLIFF PLACE  
City-St-Zip: LONGWOOD, FL 32779

Title: PS (X) Change ( ) Addition  
Name: PAQUETTE, WENDY B  
Address: 6387 TANGLEWOOD DR NE  
City-St-Zip: ST PETERSBURG, FL 33702

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WENDY PAQUETTE

PS

04/01/2003

Electronic Signature of Signing Officer or Director

Date