

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000017920

Entity Name: QUALITY DENTAL, INC.

FILED  
Apr 15, 2012  
Secretary of State

**Current Principal Place of Business:**

400 S. DIXIE HWY  
SUITE 13  
LAKE WORTH, FL 33460 US

**New Principal Place of Business:**

**Current Mailing Address:**

400 S. DIXIE HWY  
SUITE 13  
LAKE WORTH, FL 33460 US

**New Mailing Address:**

3589 S OCEAN BLVD  
L 602  
PALM BEACH, FL 33480 US

FEI Number: 65-0571044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEDERSEN, PIRKKO I DDS  
400 S DIXIE HWY  
SUITE # 13  
LAKE WORTH, FL 33460 US

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

PEDERSEN, PIRKKO I DDS  
3589 S OCEAN BLVD  
L602  
PALM BEACH, FL 33480 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: PIRKKO I PEDERSEN

04/15/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: PEDERSEN, PIRKKO I  
Address: 3589 S OCEAN BLVD L 602  
City-St-Zip: PALM BEACH, FL 33480 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: PIRKKO I PEDERSEN

PST

04/15/2012

Electronic Signature of Signing Officer or Director

Date