2005 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000034646

1. Entity Name

BEACH DENTAL CENTER, INC.



Principal Place of Business

1370 WASHINGTON AVE

SUITE 201

MIAMI BEACH, FL 33139

Mailing Address

1370 WASHINGTON AVE

SUITE 201

MIAMI BEACH, FL 33139

FILED May 02, 2005 8:00 am Secretary of State

05-02-2005 90488 044 ***150.00



04102005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0578373 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, GEORGIA 5825 SW 114 TERR MIAMI, FL 33015

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8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, GEORGIA 5825 SW 114 TERR MIAMI, FL 33015				
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					