

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000060946

FILED  
May 20, 2010  
Secretary of State

Entity Name: BOCA PROSTHODONTICS, INC.

## Current Principal Place of Business:

16940 SILVER OAK CIRCLE  
DELRAY BEACH, FL 33445 US

## New Principal Place of Business:

3695 W. BOYNTON BEACH BLVD.  
SUITE # 5  
BOYNTON BEACH, FL 33436 US

## Current Mailing Address:

16940 SILVER OAK CIRCLE  
DELRAY BEACH, FL 33445 US

## New Mailing Address:

3695 W. BOYNTON BEACH BLVD.  
SUITE # 5  
BOYNTON BEACH, FL 33436 US

FEI Number: 65-0598789

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DAVIDOFF, S. ROBERT  
16940 SILVER OAK CIRCLE  
DELRAY BEACH, FL 33445 US

## Name and Address of New Registered Agent:

DAVIDOFF, S. ROBERT  
3695 W. BOYNTON BEACH BLVD  
BOYNTON BEACH, FL 33436 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: S. ROBERT DAVIDOFF

05/20/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P  
Name: DAVIDOFF, S. ROBERT  
Address: 3695 W. BOYNTON BEACH BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: V/S  
Name: DAVIDOFF, ILA F  
Address: 3695 W. BOYNTON BEACH BLVD.  
City-St-Zip: BOYNTON BEACH, FL 33436

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: S. ROBERT DAVIDOFF

PRES

05/20/2010

Electronic Signature of Signing Officer or Director

Date