

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000049838

FILED
Apr 18, 2011
Secretary of State

Entity Name: MY DENTIST INC.

Current Principal Place of Business:

2500 E. HALLANDALE BEACH BLVD.
SUITE 601
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

2500 E. HALLANDALE BEACH BLVD.
SUITE 601
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 65-0754744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGRAS, MIRTA B
2500 E. HALLANDALE BEACH BLVD.
SUITE 601
HALLANDALE, FL 33009 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: BOBADILLA, PATRICIA M
Address: 2500 E. HALLANDALE BCH. SUITE #601
City-St-Zip: HALLANDALE, FL 33009

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: P.BOBADILLA

_____ Electronic Signature of Signing Officer or Director

DDS

04/18/2011

_____ Date