

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000053035

1. Entity Name

D & D Advanced Dental Technology, Inc.

Principal Place of Business

Mailing Address

28221 Pine Haven Way

same

#157

Bonita Springs, FL 34135

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3461927

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Hensley, Karey
10911 Bonita Beach Rd, Ste 208
Naples, FL 34135

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME Ahlmann, Dirk
STREET ADDRESS 28221 Pine Haven Way #157
CITY-ST-ZIP Bonita Springs, FL 34135

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME VP Singer Ahlmann, Gabriela
STREET ADDRESS 28221 Pine Haven Way #157
CITY-ST-ZIP Bonita Springs, FL 34135

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08.27.01

Date

(941) 548 7675

Daytime Phone #

FILED

01 OCT 18 PM 12: 28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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hensley & company pa

10911 Bonita Beach Road #208
Bonita Springs, Florida 34135
941/992-6060
Fax 941/992-9506
email: kfhcpa@aol.com

Page 2 of 2
Attachment
D#P97000053035
A0073255

Wednesday, June 06, 2001

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

**RE: D & D Advanced Dental Technology
Document #P97000053035**

Dear Sirs:

Following please find 2001 UBR and check for \$150.00. Please waive the late fee as the client resides in Germany and the form was mailed to Germany for signature and returned back to us.

Thank you for your consideration in waiving the late filing fee.

Did not receive first notice report per conversation
with Carey Hensley

Sincerely,

Neely Hensley
Office Manager

Neely Hensley