

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000053035

FILED  
Aug 26, 2008  
Secretary of State

Entity Name: D & D ADVANCE DENTAL TECHNOLOGY INC.

## Current Principal Place of Business:

2101 51ST STREET SW  
NAPLES, FL 34116

## New Principal Place of Business:

9420 FOUNTAIN MEDICAL CT  
SUITE 101  
BONITA SPRINGS, FL 34135

## Current Mailing Address:

2101 51ST STREET SW  
NAPLES, FL 34116

## New Mailing Address:

9420 FOUNTAIN MEDICAL CT  
SUITE 101  
BONITA SPRINGS, FL 34135

FEI Number: 59-3461927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HENSLEY, KAREY  
9420 FOUNTAIN MEDICAL CT  
SUITE 101  
BONITA SPRINGS, FL 34135 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

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 ( ) Delete  
Name: AHLMANN, DIRK  
Address: 28221 PINE HAVEN WAY, #157  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: V ( ) Delete  
Name: SINGER AHLMANN, GABRIELA  
Address: 28221 PINE HAVEN WAY, #157  
City-St-Zip: BONITA SPRINGS, FL 34135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: AHLMANN, DIRK  
Address: 9420 FOUNTAIN MEDICAL CT #101  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: V (X) Change ( ) Addition  
Name: SINGER AHLMANN, GABRIELA  
Address: 9420 FOUNTAIN MEDICAL CT #101  
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DIRK AHLMANN

P

08/26/2008

Electronic Signature of Signing Officer or Director

Date