

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000053035

FILED
Apr 27, 2009
Secretary of State

Entity Name: D & D ADVANCE DENTAL TECHNOLOGY INC.

Current Principal Place of Business:

9420 FOUNTAIN MEDICAL CT
SUITE 101
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

9420 FOUNTAIN MEDICAL CT
SUITE 101
BONITA SPRINGS, FL 34135

New Mailing Address:

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:

HENSLEY & COMPANY PA
9420 FOUNTAIN MEDICAL CT
SUITE 101
BONITA SPRINGS, FL 34135 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: HENSLEY & COMPANY

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KAREY REBELLO

AGEN

04/27/2009

Electronic Signature of Signing Officer or Director

Date