2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000067985

FILED Apr 24, 2005 Secretary of State

Entity Name: AFFORDABLE DENTAL CENTER OF BROWARD COUNTY, INC.

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
2323 NE 26TH AVE SUITE 111	1 33063			
POMPANO BEACH, FL 33062 Current Mailing Address:		New Mailing Address	New Mailing Address:	
2323 NE 26TH AVE SUITE 111 POMPANO BEACH, F	L 33062			
FEI Number: 65-0772837	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
SANCHEZ, ROSA STI 7504 NW 114TH TERI PARKLAND, FL 3307	R			
The above named enti in the State of Florida.	ty submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Elect	ronic Signature of Registered Age	nt	Date	
Election Campaign Financ	cing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: P Name: SANCHEZ, I Address: 7504 NW 11 City-St-Zip: PARKLAND,		Title: (Name: Address: City-St-Zip:)Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROSA STELLA SANCHEZ P 04/24/2005