


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 30, 2007 8:00 am**  
**Secretary of State**

03-30-2007 90141 013 \*\*\*150.00

<b>DOCUMENT # P98000026252</b> 1. Entity Name DENTAL SERVICES GROUP INC.	
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Principal Place of Business 2692 S.W. 137 AVE. MIAMI, FL 33175	Mailing Address 2692 S.W. 137 AVE. MIAMI, FL 33175
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40045914



01102007 No Chg-P CR2E034 (11/05)

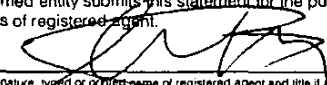
**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0820628	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fees Required
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6. Name and Address of Current Registered Agent	
LOZANO, ROSA A 2692 S.W. 137 AVE. MIAMI, FL 33175 LLL.	LEOPOLDO LOZANO 2692 SW. 137 AV. MIAMI FL. 33175.

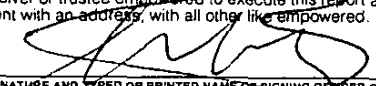
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE:  Leopoldo Lozano	3/16/2007 DATE

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOZANO, LEOPOLDO 2692 S.W. 137 AVE. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LOZANO, MARTA 2692 S.W. 137 AVE. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT LOZANO, ANGELA 2692 S.W. 137 AVE. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP LOZANO, ROSA A 2692 S.W. 137 AVE. MIAMI, FL 33175 LLL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP LOZANO, BERTA 2692 S.W. 137 AVE. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:  Leopoldo Lozano	3-16-2007 Date