2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000082790

FILED Apr 24, 2006 Secretary of State

Entity Name: Sh	HORES DENTAL GROUP, I	NC.	•		
Current Principa	l Place of Business:	New Princ	New Principal Place of Business:		
4755 N. HWY A1A VERO BEACH, FI					
Current Mailing	Address:	New Maili	New Mailing Address:		
3730 7TH TERRA VERO BEACH, FI			TERRACE SUITE #301 ACH, FL 32960		
FEI Number: 59-3593	FEI Number Applied	For () FEI Number Not App	icable () Certificate of Status Desired ()		
Name and Addre	ess of Current Registered	Agent: Name and	Address of New Registered Agent:		
MOORE, JOHN E 5070 N ALA., STE VERO BEACH, FI	200				
The above named in the State of Flor		nt for the purpose of changing i	ts registered office or registered agent, or bo	oth,	
SIGNATURE:					
E	Electronic Signature of Regis	stered Agent	Date		
Election Campaign F	Financing Trust Fund Contribution	on ().			
OFFICERS AND	DIRECTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Address: 3730 7	() Delete SON, BEN D DMD 'TH TERRACED #301 BEACH, FL 32960	Title: Name: Address: City-St-Zip:	P (X) Change () Addition EMERSON, BEN D DMD 3730 7TH TERRACE SUITE #301 VERO BEACH, FL 32960		

Title: () Delete Title: () Change () Addition

EMERSON, BEN D M.D. Name: Name: Address: 3730 7TH TERR., STE 301 Address: VERO BEACH, FL 32960 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BEN D. EMERSON Ρ 04/24/2006