2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# P99000044369

Entity Name: AMERICA DENTAL CLINIC CORP.

Current Principal Place of Business:

3631 SW 87 AVE
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

1800 W 48 ST #201
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 65-0919582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARRIENTOS, RAMIRO A
3850 SW 87 AVE #101
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

TOIRAC, MARIA
3850 SW 87 AVE #101
MIAMI, FL 33165 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: MARIA TOIRAC 02/05/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TOIRAC, MARIA
Address: 3631 SW 87TH AVE.
City-St-Zip: MIAMI, FL 33165

Title: VP (X) Delete
Name: BARRIENTOS, RAMIRO A
Address: 3631 SW 87TH AVE.
City-St-Zip: MIAMI, FL 33165

Title: S (X) Delete
Name: MONTERO, LUIS O
Address: 3631 SW 87TH AVE.
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARIA TOIRAC P 02/05/2009
Electronic Signature of Signing Officer or Director Date