DOCUMENT # P99000076001 1. Entity Name DENT CONSULTANTS, INC.				May 22 Secret 04-25-200	, 2000 ary of 0 90106 050	Stat
	Mailing Address 39 SW 9TH TERR. BOCA RATON FL 33496-450					
	3. Mailing Address					
Suite, Apt. #, etc.	Suite, Apt. #, etc.		{	LINGHOU AN INH WHI WHI WHI WHI WHI WHI WHI WHI WHI WH		
City & State	City & State			FEI Number		oplied For
Zip Country	Zip	Country		L FEI Number 65-0943819	\$8.75 Ad	ot Applicable
				Certificate of Status Desired	Fee Require	
6. Name and Address of Current Re	gistered Agent	Name	7	Name and Address of New Regist	ered Agent	
IMBIMBO, RICHARD 39 SW 9TH TERR. BOCA RATON FL 33486		Street .	Address (P.C). Box Number is Not Acceptable)		
DOUX INTON FL 32100		City			FL Zip Cod	le
8. The above manned entity submits this statement for the purpose of changing			or registered	agent, or both in the State of Florida		
	A CONTRACT OF A	registeren billing (4-18-0	7)	
SIGNATURE Signature, 17-pd or printed name of registered agent and	fuile if applicable. (NOTI	E: Registered Agent sign	ature required wh		DATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.		II FEE IS \$150	.00			
 (See criteria on back) 	Make Check Payab	00 Fee will be \$ ole to Departme		10. Election Campaign Financin Trust Fund Contribution.	19 \$9. Adde	DO May Be d to Fees
11. OFFICERS AND D	Make Check Payab	le to Departme			S AND DIRECTOR	d to Fees
11. OFFICERS AND DI ITTLE WROSED DUT NAME RECEIPTOR DO	Make Check Payab	Ne to Departme	nt of State	Trust Fund Contribution.	Adde	d to Fees
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