2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V58819

City-St-Zip:

PEMBROKE PINES, FL 33026

Entity Name: LAKES MALL DENTAL, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
11401 PINES BLVD. SUITE 220 PEMBROKE PINES, FL	33026			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
C/O CPA PO BOX 6006 BOCA RATON, FL 3342	27	11401 PINES BLVD SUITE 220 PEMBROKE PINES, FL	33026	
FEI Number: 65-0353286	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
SLOANE, RONALD DR 11401 PINES BLVD. SUITE 220 PEMBROKE PINES, FL	33026 US			
The above named entity in the State of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: P (Name: SLOANE, RON Address: 11401 PINES		Title: (Name: Address:) Change () Addition	

City-St-Zip:

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: RONALD SLOANE PRES 04/29/2005