

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000063746

Entity Name: MY SMILE DENTAL, INC.

Current Principal Place of Business:

520 48TH STREET COURT EAST
BRADENTON, FL 34208

Current Mailing Address:

520 48TH STREET COURT EAST
BRADENTON, FL 34208

FEI Number: 27-0678459

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALLERY, MARTINA D.D.S.
520 48TH STREET COURT EAST
BRADENTON, FL 34208 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MALLERY, MARTINA D.D.S.
Address 520 48TH STREET COURT EAST
City-State-Zip: BRADENTON FL 34208

I hereby 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 all other like empowered.

SIGNATURE: MARTINA MALLERY

PRESIDENT

04/17/2013

Electronic Signature of Signing Officer/Director Detail

Date