2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2014
Secretary of State
CC0614911230

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Entity Name: NAPLES DENTAL ART CENTER INC.

Current Principal Place of Business:

1575 PINE RIDGE RD
SUITE18
NAPLES, FL 34109

Current Mailing Address:

1575 PINE RIDGE RD
SUITE18
NAPLES, FL 34109

FEI Number: 52-2185161

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EETESSAM, ALI M
1575 PINE RIDGE RD
SUITE 18
NAPLES, FL 34109 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	DR.
Name	EETESSAM, ALI SHA
Address	4336 KENSINGTON HIGH ST
City-State-Zip:	NAPLES FL 34105

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: EETESSAM , ALI SHA DR 01/13/2014

Electronic Signature of Signing Officer/Director Detail — Date