## **2005 FOR PROFIT CORPORATION** ANNUAL REPORT (AR)

changed, or on an attachment with

SIGNATURE:

## Feb 12, 2005 08:00 AM DOCUMENT # F94000005860 **Secretary of State** 1. Entity Name HENRY SCHEIN, INC. Principal Place of Business Mailing Address 135 DURYEA ROAD 135 DURYEA ROAD MELVILLE NY 11747-3834 **MELVILLE NY 11747-3834** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc 1st MOORE CR2E034 (10/04) 4. FEI Number City & State City & State Applied For 11-3136595 Not Applicab\* Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE Registered Agent signature required when remstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May B. After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. THEF ☐ Addibi ME Delete Change BERGMAN, STANLEY M NAME 1/000000227723 135 DURYEA ROAD STREET ADDRESS 02/14/05-800iō-014 150.00 STREET ADDRESS **MELVILLE NY 11747-3834** CITY-ST-ZIP City-ST-ZiP Delete THE Change Addin. THEF NAME BRESLAWSKI, JAMES P NAME 135 DURYEA ROAD STREET ADORESS STREET ADDRESS City-St-ZIP MELVILLE NY 11747 CITY-ST-ZIP ~ [ ] Addiii ☐ Defete RITLE ☐ Change THILE NAME NAME ETTINJER, MICHAEL STREET ADDRESS STREET ADDRESS 135 DURYEA ROAD CITY ST-ZIP CHY-ST-7tP MELVILLE NY 11747 SVD TITLE ☐ Change Addition | THEE ☐ Delete PALADINO, STEVEN NAME NAME 135 DURYEA ROAD STREET AODRESS CIREFI ADDRESS MELVILLE NY 11747 City-St-7IP CITY-ST-ZIP SVD A :: " ☐ Delete D Change THE TITLE BENJAMIN, GERRY NAME NAME 135 DURYEA ROAD STREET ADDRESS STREET ADDRESS **MELVILLE NY 11747** CITY-ST-ZIP CHY-SI-ZIP D Change Artes Delete TITLE THILE SCHEIN, MARVIN NAME 135 DURYEA ROAD STREET ADDRESS STREET ADDRESS **MELVILLE NY 11747** CILY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 1 19 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 signature shall have the same legal effect as if made under oath; that I am an officer or direction of the corporation or the receiver or tristee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 chapted or on an attachment with 64 address with all other like appropriate.

**FILED**