

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000076997

**FILED  
Dec 10, 2009  
Secretary of State**

**Entity Name:** KUSER DENTAL LABORATORY INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

605 S DELANEY AVE  
ORLANDO, FL 32801

**Current Mailing Address:**

**New Mailing Address:**

605 S DELANEY AVE  
ORLANDO, FL 32801

**FEI Number:** 37-1471409      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

KUSER, GEORGE T  
605 S DELANEY AVE  
ORLANDO, FL 32801      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: GEORGE T KUSER  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            D            ( ) Delete  
Name:            KUSER, GEORGE T  
Address:        605 S DELANEY AVE  
City-St-Zip:    ORLANDO, FL 32801

Title:                                    ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:            V            ( ) Delete  
Name:            GUSTAFSON-KUSER, LONA J  
Address:        605 S DELANEY AVE  
City-St-Zip:    ORLANDO, FL 32801

Title:                                    ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GEORGE T KUSER      P      12/10/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date