

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 09, 2005 08:00 AM
Secretary of State**

DOCUMENT # F00000002868 1. Entity Name IMPLANT INNOVATIONS HOLDING CORPORATION	
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Principal Place of Business 4555 RIVERSIDE DRIVE PALM BEACH GARDENS, FL 33410	Mailing Address 4555 RIVERSIDE DRIVE PALM BEACH GARDENS, FL 33410
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04052005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 35-2088040	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SABIN, EDWARD G 4555 RIVERSIDE DRIVE PALM BEACH GARDENS, FL 33410	DO NOT WRITE IN THIS SPACE
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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 reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HARTMAN, GREGORY D AIRPORT INDUSTRIAL PARK WARSAW, IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SABIN, EDWARD G 4555 RIVERSIDE DRIVE PALM BEACH GARDENS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HANN, DANIEL P AIRPORT INDUSTRIAL PARK WARSAW, IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILLER, DANE A AIRPORT INDUSTRIAL PARK WARSAW, IN
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DOEDENS, BART 4555 RIVERSIDE DRIVE PALM BEACH GARDENS, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CRISER, GLENN 4555 RIVERSIDE DRIVE PALM BEACH GARDENS, FL

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04/11/05-800005-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward G. Sabin **EDWARD G. SABIN** APRIL 5, 2005 561-776-6706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #