

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000080490

Entity Name: RUIZ DENTAL LAB INC

Current Principal Place of Business:

8050 NW 103 ST
207
HIALEAH GARDENS, FL 33016

Current Mailing Address:

8050 NW 103 ST
207
HIALEAH GARDENS, FL 33016

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUIZ, FLORENTINO
16329 NW 11 ST
PEMBROKE PINES, FL 33028 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 RUIZ, FLORENTINO
Address 16329 NW 11 ST
City-State-Zip: PEMBROKE PINES FL 33028

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: FLORENTINO RUIZ

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date