

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 573116

FILED  
Mar 13, 2007  
Secretary of State

Entity Name: BRLIT DENTAL LABORATORY, INC.

## Current Principal Place of Business:

4232 MCINTOSH LANE  
SARASOTA, FL 342325027

## New Principal Place of Business:

## Current Mailing Address:

4232 MCINTOSH LANE  
SARASOTA, FL 342325027

## New Mailing Address:

FEI Number: 59-1824266

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PECHAR, FRANK J.  
4232 MCINTOSH LANE  
SARASOTA, FL 33582 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PECHAR, FRANK J.,  
Address: 3948 BERLIN DR.  
City-St-Zip: SARASOTA, FL

Title: TD ( ) Delete  
Name: PECHAR, ELEONORA M.,  
Address: 3948 BERLIN DR.  
City-St-Zip: SARASOTA, FL

Title: VP ( ) Delete  
Name: EMIL M. BRLIT, JR.  
Address: 4119 GREEN TREE AVE  
City-St-Zip: SARASOTA, FL 34233

Title: S ( ) Delete  
Name: ELENA H. BRLIT,  
Address: 4119 GREEN TREE AVE  
City-St-Zip: SARASOTA, FL 34233

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANK PECHAR

P

03/13/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date