

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90039 035 ***150.00

DOCUMENT # J 23273 ✓
1. Entity Name
 M&B Dental Lab, Inc. ✓

Principal Place of Business 1609 Hampton Court
 Suite 180
 Safety Harbor, FL 34695
Mailing Address

2. Principal Place of Business
 Suite, Apt. #, etc.
3. Mailing Address
 10727 Maple Chase Dr.
 Suite, Apt. #, etc.

City & State Boca Raton, FL
Zip 33498
Country USA

4. FEI Number 59.2702664
Applied For
☐ Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Raymond, J. Paul
 625 Court Street.
 Suite 200
 Clearwater, FL 33756

7. Name and Address of New Registered Agent
Name Sean McGhie
Street Address (P.O. Box Number is Not Acceptable)
 10727 Maple Chase Dr.
City Boca Raton **FL** **Zip Code** 33498

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.
SIGNATURE [Signature] Sean McGhie **DATE** 4/30/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)
10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE: [Signature] Sean McGhie **DATE** 4/30/01 **305.374.8600**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)

Attachment
J23273
770015

ATTN SEAN MCGHIE

5/01/01 CORPORATE DETAIL RECORD SCREEN 1:41 PM
NUM: J23273 ST:FL ACTIVE/FL PROFIT FLD: 07/09/1986
LAST: REINSTATEMENT FLD: 07/14/1999
FEI#: 59-2702664
NAME : M & B DENTAL LAB, INC.
PRINCIPAL: 1609 HAMPTON COURT CHANGED: 07/14/99
ADDRESS SUITE 180
SAFETY HARBOR, FL 34695
RA NAME : RAYMOND, J. PAUL NAME CHG: 07/14/99
RA ADDR : 625 COURT STREET ADDR CHG: 07/14/99
SUITE 200
CLEARWATER, FL 33756 US
ANN REP : (1998) IY 07/14/99 (1999) IY 07/14/99 (2000) A 05/31/00

5/01/01 OFFICER/DIRECTOR DETAIL SCREEN 1:41 PM
CORP NUMBER: J23273 CORP NAME: M & B DENTAL LAB, INC.
TITLE: PDS NAME: GREENBERG, ELISA A
1609 HAMPTON COURT
SAFETY HARBOR, FL 34695
TITLE: VP NAME: GREENBERG, MELISSA F
1609 HAMPTON COURT
SAFETY HARBOR, FL 34695
TITLE: D NAME: GREENBERG, LESTER B
1609 HAMPTON COURT
SAFETY HARBOR, FL 34695

----- THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT -----