

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000120011

FILED
Apr 19, 2011
Secretary of State

Entity Name: WIRE-D ORTHODONTIC LABORATORY, LLC

Current Principal Place of Business:

2422 SAN PIETRO CIRCLE
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

2422 SAN PIETRO CIRCLE
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 27-1520677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NIEVES-HANZAS, CLAUDIA M
2422 SAN PIETRO CIRCLE
PALM BEACH GARDENS, FL 33410 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: NIEVES-HANZAS, CLAUDIA M
Address: 2422 SAN PIETRO CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM
Name: ROJAS DE NIEVES, MAGALY
Address: 2422 SAN PIETRO CIRCLE
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CLAUDIA M NIEVES-HANZAS

MRS

04/19/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date