2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L37645

FILED Apr 11, 2005 Secretary of State

Entity Name: PRECISION CRAFT DENTAL LABORATORY INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
BROKE RD FL 33023	US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
BROKE RD FL 33023	US			
65-0181612	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
		nurnose of changing its registere	d office or registered agent, or both	
of Florida.	submits this statement for the	purpose of changing its registered	d office of registered agent, or both,	
!E:				
Electro	onic Signature of Registered Ag	ent	Date	
paign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
OCHOA, ANT 6360 SW 34	ONIO, STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
DST () Delete	Title: Name:	() Change () Addition	
	BROKE RD FL 33023 ailing Addres BROKE RD FL 33023 65-0181612 Address of ARA 80 CT. 33155 US named entity of Florida. Electro paign Financi AND DIRECTOR OCHOA, ANTO 6360 SW 343 MIRAMAR, FL	BROKE RD FL 33023 US ailing Address: BROKE RD FL 33023 US 65-0181612 FEI Number Applied For () Address of Current Registered Agent: ARA 80 CT. 33155 US named entity submits this statement for the of Florida. EE: Electronic Signature of Registered Agent apaign Financing Trust Fund Contribution (). AND DIRECTORS: DP () Delete OCHOA, ANTONIO, 6360 SW 34 STREET MIRAMAR, FL 33023 DST () Delete	ARA BO CT. 33155 US Rectangle Financing Trust Fund Contribution (). ADDITIONS/CHANGI COHOA, ANTONIO, 6360 SW 34 STREET MIRAMAR, FL 33023 US New Mailing Address: PEI Number Not Applicable () FEI Number Not Applicable () Name and Address of ARA Name and Address of ARA Address: New Mailing Address: Name and Address: Name and Address of ARA Name and Address of ARA Address: New Mailing Address: New Mai	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANTONIO OCHOA DP 04/11/2005