

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M20544

FILED  
Apr 30, 2010  
Secretary of State

Entity Name: STAR DENTAL LAB SERVICES, INC.

**Current Principal Place of Business:**

1490 W. 49TH PLACE #217  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

1490 W. 49TH PLACE #217  
HIALEAH, FL 33012

**New Mailing Address:**

FEI Number: 59-2589169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RESTREPO, JUAN L  
5108 SW 157 AVENUE  
MIRAMAR, FL 33027 US

**Name and Address of New Registered Agent:**

RESTREPO, JUAN L  
1490 W. 49TH PLACE #217  
HIALEAH, FL 33012 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: JUAN L RESTREPO

04/30/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: RESTREPO, JUAN L  
Address: 1490 W. 49TH PLACE #217  
City-St-Zip: HIALEAH, FL 33012

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: JUAN L RESTREPO

PRES

04/30/2010

Electronic Signature of Signing Officer or Director

Date