

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M80518

FILED
Apr 30, 2011
Secretary of State

Entity Name: PROSTHETIC ARTS LABORATORY, INC.

Current Principal Place of Business:

3015 BAYVIEW DRIVE
SUITE E
FORT LAUDERDALE, FL 33306 US

New Principal Place of Business:

Current Mailing Address:

5796 SW 89TH WAY
COOPER CITY, FL 33328 US

New Mailing Address:

FEI Number: 65-0053610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STONE, CHARLES
5796 SW 89TH WAY
COOPER CITY, FL 33328 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

OFFICERS AND DIRECTORS:

Title: DPST
Name: STONE, CHARLES R
Address: 5796 SW 89TH WAY
City-St-Zip: COOPER CITY, FL 33328

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: CHARLES STONE

DPST

04/30/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date