

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000048070

Entity Name: W & N DENTAL LAB INC.

FILED  
Apr 28, 2005  
Secretary of State

## Current Principal Place of Business:

6535 RUE VERSAILLES #402  
MIAMI BEACH, FL 331413779

## New Principal Place of Business:

1001 NE 36TH STREET  
SUITE E 10  
POMPANO BEACH, FL 33064

## Current Mailing Address:

6535 RUE VERSAILLES #402  
MIAMI BEACH, FL 331413779

## New Mailing Address:

1001 NE 36TH STREET  
SUITE E 10  
POMPANO BEACH, FL 33064

FEI Number: 65-1012552

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MELEGARIO, WALTER  
6835 RUE VERSAILLES #402  
MIAMI BEACH, FL 33141 US

## Name and Address of New Registered Agent:

MELEGARIO, WALTER  
1001 NE 36TH STREET  
SUITE E 10  
POMPANO BEACH, FL 33064 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: WALTER MELEGARIO

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MELEGARIO, WALTER  
Address: 6835 RUE VERSAILLES #402  
City-St-Zip: MIAMI BEACH, FL 331413779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MELEGARIO, WALTER  
Address: 1001 NE 36TH STREET, SUITE E 10  
City-St-Zip: POMPANO BEACH, FL 33064

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: WALTER MELEGARIO

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date