2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000033995

Entity Name: A&N DENTAL LAB, INC.

FILED Jan 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7593 ENTERPRISE DR 7593 ENTERPRISE DR

71

WEST PALM BEACH, FL 33404 WEST PALM BEACH, FL 33404

Current Mailing Address: New Mailing Address:

7593 ENTERPRISE DR 7593 ENTERPRISE DR

WEST PALM BEACH, FL 33404 WEST PALM BEACH, FL 33404

FEI Number: 65-1089169 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HAMDAN, NADA
1963 BRANDYWINE RD #101
HAMDAN, NADA
36 STONEY DRIVE

WEST PALM BEACH, FL 33409 US PALM BEACH GARDEN, FL 33410 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: 01/20/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 HAMDAN, NADA
 Name:
 HAMDAN, NADA

 Address:
 7963 BRANDYWINE RD #101
 Address:
 36 STONEY DRIVE

City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: PALM BEACH GARDEN, FL 33410

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NADA HAMDAN PRES 01/20/2009