2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P01000118563

Entity Name: IMPLANT SOLUTIONS LABORATORY, INC.

Current Principal Place of Business:

801 MAPLEWOOD DR. #13
JUPITER, FL 33458

New Principal Place of Business:

612 N. ORANGE AVE.
D1
JUPITER, FL 33458

Current Mailing Address:

801 MAPLEWOOD DR. #13
JUPITER, FL 33458

New Mailing Address:

612 N. ORANGE AVE.
D1
JUPITER, FL 33458

FEI Number: 04-3586586 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HACKNEY, ROBERT C
11891 US HWY ONE STE 105
NORTH PALM BEACH, FL 33408 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: MILLER, ALAN
Address: 801 MAPLEWOOD DR. #13
City-St-Zip: JUPITER, FL 33458

Title: DVS ( ) Delete
Name: RUSSO, CRAIG
Address: 801 MAPLEWOOD DR. #13
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: MILLER, ALAN
Address: 612 N. ORANGE AVE #D1
City-St-Zip: JUPITER, FL 33458

Title: DVS (X) Change ( ) Addition
Name: RUSSO, CRAIG
Address: 612 N. ORANGE AVE. #D1
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAN M. MILLER DPT 05/01/2006

Electronic Signature of Signing Officer or Director Date