2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 02, 2006 08:00 AN Secretary of State DOCUMENT # P02000021310 1. Entity Name JMS DENTAL LAB, INC. Mailing Address Principal Place of Business 2769 HARVARD PL 2769 HARVARD PL BALDWIN, NY 11510 BALDWIN, NY 11510 04282006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0609408 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SINGER, JERRY 8424 NW 57TH ST. TAMARAC, FL 33351 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent egistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE SINGER, JERRY NAME STREET ADDRESS 2769 HARVARD PL BALDWIN, NY 11510 1000000558468 05/17/06-80095-006 158.75 CJIY-SI-ZIP TITLE SINGER, MARY ANNE NAME STREET ADDRESS 2769 HARVARD PL CITY-ST-ZIP BALDWIN, NY 11510 THE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE MAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF GIGNING OFFICER OR DIRECTO

1/27/06 Date

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FILED