

# 2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000026579

**FILED**  
**Jun 25, 2014**  
**Secretary of State**

**Entity Name:** GEOMAR DENTAL LAB CORP.

**Current Principal Place of Business:**

2701 SW 142 AVE  
MIAMI, FL 33175

**New Principal Place of Business:**

8000 W 24 AVE.  
SUITE 2  
HIALEAH, FL 33016

**Current Mailing Address:**

JORGE ROSADO  
16380 SW 272 ST.  
MIAMI, FL 33183

**New Mailing Address:**

JORGE ROSADO  
8000 W 24 AVE.  
HIALEAH, FL 33016

**FEI Number:** 75-3025989

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSADO, JORGE A  
16380 SW 272 ST  
MIAMI, FL 33183 US

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

ROSADO, JORGE A  
3371 W 73 TERR  
HIALEAH, FL 33018 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: JORGE A ROSADO

06/25/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ROSADO, JORGE A  
Address: 3371 W 73 TERR  
City-St-Zip: HIALEAH, FL 3018

Title: DV  
Name: TIO, MARTHA  
Address: 3371 W. 73 TERR.  
City-St-Zip: HIALEAH, FL 33018

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: JORGE A ROSADO

PD

06/25/2014

Electronic Signature of Signing Officer or Director

Date