

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041639

**FILED**  
**Jan 11, 2012**  
**Secretary of State**

**Entity Name:** GOLDSMITH DENTAL LABORATORY, INC.

**Current Principal Place of Business:**

236 SE 23 AVE  
BOYNTON BCH, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

236 SE 23 AVE  
BOYNTON BCH, FL 33435

**New Mailing Address:**

FEI Number: 30-0075963

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOLDSMITH, JESSE  
5229 BRISATA CIRCLE  
F  
BOYNTON BCH, FL 33437 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: GOLDSMITH, JESSE  
Address: 5229 BRISATA CIRCLE UNIT F  
City-St-Zip: BOYNTON BCH, FL 33437

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: JESSE GOLDSMITH, PRESIDENT

PRES

01/11/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date