

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000087214

FILED
Apr 06, 2003
Secretary of State

Entity Name: ELLERY DENTAL LAB CORP.

Current Principal Place of Business:

3700 N. PINE ISLAND RD., #107
SUNRISE, FL 33051

New Principal Place of Business:

Current Mailing Address:

3700 N. PINE ISLAND RD., #107
SUNRISE, FL 33051

New Mailing Address:

FEI Number: 13-4207304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
3929 N. FEDERAL HWY.
POMPANO BCH, FL 33064 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: RIBEIRO, BRENO E
Address: 3700 N. PINE ISLAND RD., #107
City-St-Zip: SUNRISE, FL 33051

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRENO ELLERY RIBEIRO

PTD

04/06/2003

Electronic Signature of Signing Officer or Director

Date