

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000115334

Entity Name: LOGAN DENTAL LAB, INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

4131 N SR 7
OAKLAND SHOPPING CENTER
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:**Current Mailing Address:**

4131 N SR 7
OAKLAND SHOPPING CENTER
LAUDERDALE LAKES, FL 33319

New Mailing Address:

FEI Number: 57-1136969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANCHAN, RAMLOGAN
4765 NW 2ND PLACE
PLANTATION, FL 33317 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: P () Delete
Name: RAMLOGAN, MANCHAN
Address: 4765 NW 2ND PLACE
City-St-Zip: PLANTATION, FL 33317

Title: VP () Delete
Name: RAMLOGAN, KOOMARIE
Address: 4765 NW 2ND PLACE
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: MANCHAN RAMLOGAN

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date