

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000097869

Entity Name: ARA DENTAL LAB, INC.

FILED
Mar 16, 2005
Secretary of State

Current Principal Place of Business:

C/O ALFREDO E. MESA
8050 SW 103RD ST.#208
HIALEAH GARDENS, FL 33016

Current Mailing Address:

C/O ALFREDO E. MESA
8050 SW 103RD ST.#208
HIALEAH GARDENS, FL 33016

New Principal Place of Business:

C/O ALFREDO E. MESA
8050 NW 103RD ST.#208
HIALEAH GARDENS, FL 33016

New Mailing Address:

C/O ALFREDO E. MESA
8050 NW 103RD ST.#208
HIALEAH GARDENS, FL 33016

FEI Number: 05-0586048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESA, ALFREDO E
8050 NW 3 ST #207
HIALEAH GARDENS, FL 33016 US

Name and Address of New Registered Agent:

MESA, ALFREDO E
8050 NW 103RD STREET
208
HIALEAH GARDENS, FL 33016 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: EZEQUIEL GARCIA

03/16/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GARCIA, EZEQUIEL
Address: 8050 NW 3 ST #207
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: DV () Delete
Name: MESA, ALFREDO E
Address: 8050 NW 3 ST #207
City-St-Zip: HIALEAH GARDENS, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GARCIA, EZEQUIEL
Address: 8050 NW 103RD ST #208
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: DV (X) Change () Addition
Name: MESA, ALFREDO E
Address: 8050 NW 103RD ST #208
City-St-Zip: HIALEAH GARDENS, FL 33016

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: EZEQUIEL GARCIA

DP

03/16/2005

Electronic Signature of Signing Officer or Director

Date