## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## **FILED** Jan 31, 2008 08:00 AM Secretary of State

DOCUMENT #	P03000126817	

1. Entity Name

TRAN DENTAL LABORATORY, INC.



Principal Place of Business

101 BUCK DR

FT WALTON BCH, FL 32548

Mailing Address

101 BUCK DR

FT WALTON BCH, FL 32548



DO	NOT	WRITE	IN THIS	SPACE
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CR2E034 (11/05) 01242008 No Chg-P

4. FEI Number 20-0403584

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIEP, STEVEN 101 BUCK DR FT WALTON BCH, FL 32548

## DO NOT WRITE IN THIS SPACE

		,					
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE Signature, typed or printed name of registered agont and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE							
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan- Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIEP, STEVEN 101 BUCK DR FT WALTON BCH, FL 32548				U00000808749 02/07/08-80060-023 150.00		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY+ST+ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		:					
TITLE NAME STREET ADDRESS CITY - ST - ZIP							
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: 1/28/08 850-598-7434							