

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000142453

FILED
Mar 18, 2010
Secretary of State

Entity Name: PINES ORTHODONTIC LAB, INC.

Current Principal Place of Business:

2249 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

2249 N. UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024

New Mailing Address:

FEI Number: 20-1064609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRONAUER, EDWARD
2249 N UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 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: PD
Name: ANGELAKIS, ROTH O
Address: 2249 N. UNIVERSITY DRIVE
City-St-Zip: PEMBROKE PINES, FL 33024

Title: STD
Name: CRONAUER, EDWARD A
Address: 2249 N. UNIVERSITY DRIVE
City-St-Zip: PEMBROKE PINES, FL 33024

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: EDWARD CRONAUER

PRES

03/18/2010

Electronic Signature of Signing Officer or Director

Date