

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 20, 2006 8:00 am
Secretary of State

03-24-2006 90016 037 ***150.00

DOCUMENT # P04000065427 1. Entity Name AMELIA DENTAL LAB INC.			
Principal Place of Business 530 20TH STREET NE NAPLES, FL 34120		Mailing Address 530 20TH STREET NE NAPLES, FL 34120	
2. Principal Place of Business 1910 40TH TERR. SW Suite, Apt. #, etc.		3. Mailing Address SAME AS ABOVE Suite, Apt. #, etc.	
City & State NAPLES, FL		City & State NAPLES, FL	
Zip 34116		Country Collier	
4. FEI Number APPLIED FOR 20-2157016		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BEATRIS, CONDOMINA 2013 50TH TERR SW NAPLES, FLORIDA, FL 34116		7. Name and Address of New Registered Agent Name MARIA A. HERNANDEZ Street Address (P.O. Box Number is Not Acceptable) 530 20TH STREET N.E. City NAPLES FL Zip Code 34120	
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 MARIA A. HERNANDEZ (NOTE: Registered Agent Signature required when registering) 3-16-06 DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MRS. MARIA AMELIA, HERNANDEZ 530 20TH STREET NE NAPLES, FL 34120	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MRS. MARIA AMELIA, HERNANDEZ 530 20TH STREET NE NAPLES, FL 34120	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MRS. MARIA AMELIA, HERNANDEZ 530 20TH STREET NE NAPLES, FL 34120	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MRS. MARIA AMELIA, HERNANDEZ 530 20TH STREET NE NAPLES, FL 34120	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MRS. MARIA AMELIA, HERNANDEZ 530 20TH STREET NE NAPLES, FL 34120	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing 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: MARIA A. HERNANDEZ		Date 3-16-06	