

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159413

FILED
Mar 17, 2005
Secretary of State

Entity Name: DENTAL LABORATORY CENTER, INC.

Current Principal Place of Business:

8000 BISCAYNE BLVD.
3RD FLOOR
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

8000 BISCAYNE BLVD.
3RD FLOOR
MIAMI, FL 33138

New Mailing Address:

FEI Number: 34-2025091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, WILLIAM
3054 SW 165TH AVENUE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

TORRES, JUSTO
8000 BISCAYNE BLVD.
MIAMI, FL 33138 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: JUSTO TORRES

03/17/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: TORRES, JUSTO
Address: 965 BRIAR RIDGE RD.
City-St-Zip: WESTON, FL 33327

Title: SVD () Delete
Name: TORRES, WILLIAM
Address: 3054 SW 165TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

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 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: JUSTO TORRES

PTD

03/17/2005

Electronic Signature of Signing Officer or Director

Date