

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000130457

FILED
Apr 30, 2009
Secretary of State

Entity Name: DENTEETH DENTAL LAB, INC.

Current Principal Place of Business:

6130 N.W. 11TH. STREET
FT. LAUDERDALE, FL 33313 US

New Principal Place of Business:

7800 W OAKLAND PARK BLVD
112B
SUNRISE, FL 33351 US

Current Mailing Address:

6130 N.W. 11TH. STREET
FT. LAUDERDALE, FL 33313 US

New Mailing Address:

7800 W OAKLAND PARK BLVD
112B
SUNRISE, FL 33351 US

FEI Number: 20-3514913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINZON, MIQUEL A
6130 N.W. 11TH. STREET
FT. LAUDERDALE, FL 33313 US

Name and Address of New Registered Agent:

PINZON, MIQUEL A
8049 NW 10TH STREET
PLANTATION, FL 33322 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PV D () Delete
Name: PINZON, MIQUEL A
Address: 6130 N.W. 11TH. STREET
City-St-Zip: FT. LAUDERDALE, FL 33313 US

Title: ST D () Delete
Name: PINZON, ANDREA D
Address: 4748 WEST ATLANTIC BLVD. APT. 205
City-St-Zip: COCONUT CREEK, FL 33063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV D (X) Change () Addition
Name: PINZON, MIQUEL A
Address: 8049 NW 10TH STREET
City-St-Zip: PLANTATION, FL 33322 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MIGUEL PINZON

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04/30/2009

Electronic Signature of Signing Officer or Director

Date