

2007 FOR PROFIT CORPORATION REINSTATEMENT

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DOCUMENT # P06000067866	
1. Entity Name FAST DENTAL SUPPLIES, INC.	



FILED

07 OCT 23 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 8140 NW 74 AVE STE. 3 MIAMI, FL 33172	Mailing Address 8140 NW 74 AVE STE. 3 MIAMI, FL 33172
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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REINSTATEMENT

4. FEI Number # 14-1974025	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent COSTA, ONELIE 255 ALHAMBRA CIR. 455 CORAL GABLES, FL 33134	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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: <i>[Signature]</i>	DATE

FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOBIAKOV, MICHAEL 907 HUNTING LODGE DR MIAMI, FL 33166	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700111226897 10/23/07--01043--015 **300.00
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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: <i>[Signature]</i>	10/10/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

2082

October 10th, 2007.

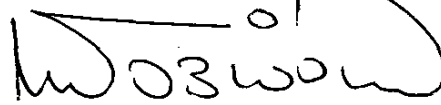
To: Florida Department of State.
Division of Corporation

Subject: Fast Dental Supplies, Inc.
14-1974025.

Please be advised that we never received our notice of annual report, for the corporation Fast Dental Supplies, Inc all this year. Enclosed find the fee \$150.00 as discussed with your department for the reinstatement of my corporation for the year 2007.

Sorry for any inconvenience that this have caused.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'M Kobiakov', with a long horizontal line extending from the end of the signature.

Michael Kobiakov
Fast Dental Supplies, Inc.