2008 FOR PROFIT CORPORATION

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Daytime Phone #

	ANNUAL R	EPORT (AR)					100
DOCUMENT # P07000039506 1. Enlity Name							V
UNIQUE DENTURE DENTAL LABORATORY, INC.			1	29 PH 2: 1			
Principal Place	e of Business	Mailing Address			ARY OF S.A. ISSEE, FLOR	15.	
735 S US H	WY 441	PO BOX 1157 LADY LAKE FL 321581	15	LLAH!	SSEE, FLOR	JUA Haringan dan mengan bermanan	
LADY LAKE	FL 32159	7					
<u> </u>	ace of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt. #, etc. Suite, Apt. #, etc.			2n	d MOORE	CR2E034 (4/08)		
City & State City & State		City & State		4. FEI Numb	\$74911	/	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 A	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New F	legistered Agent	
			Name	**************************************			<u>-</u>
GARCIA, RODOLFO 735 S US HWY 441 APT 119		Street Ac	Street Address (P.O. Box Number is Not Acceptable)				
	Y LAKE FL 32159						
·			City			FL Zip Co	
8. The above the obligat	named entity submits this statement for ions of registered agent.	or the purpose of changing its re	gistered office of	registered agent, or bo	oth, in the Stale of Fi	orida. I am familiar wit	h, and accept
SIGNATURE.	. /<.(11-1				01/16/08	
	Signature, typed or printed name of overland about	Laria tille i applicable. (NOTE R	legistared Agent signatu	re natured when reinstating)		SATE ,	
	ILE NOW!!! FEE IS \$550.00 DUE BY September 3, 2008 x Payable to Florida Department o	late fee. By checkle	ng this box, the o	waiver of the \$400.00 orporation certifies it file is \$150.00.	9. Election Camp Trust Fund Co		5.00 May Be dded to Fees
10.	OFFICERS AND		11.	ADDITIONS	/CHANGES TO OF	FICERS AND DIRECTO	
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CITY-ST-ZIP		·	CITY-ST-ZIP	<u> </u>	···		
indicated of the co	certify that the information supplied wild on this report or supplemental report for supplemental report reportation of the receiver or trustee emi	is true and accurate and that my powered to execute this report a	y signature shall h	ave the same legal eff	ect as if made unde	r oath; that I am an offic	cer or director
changed	, or on an attachment with an address	, with all other like empowered.	,			• •	

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UNIQUE DENTURE DENTAL LABORATORY, INC.

PO Box 1157 Lady Lake, FL 32158-1157

July 24, 2008

Division of Corporations Annual Report Section Department of State PO Box 6850 Tallahassee, FL 32314

RE: DOCUMENT ID P07000039506

Sirs:

On January 16, 2008, we sent by regular mail the 2008 Annual Renewal Report for our Corporation; enclosed you will find a copy of our check number 1132 for the amount of \$150.00, issued on January 16, 2008 the corresponding annual report's filing fee. This check was endorsed and deposited on January 24, 2008 by your offices.

We are attaching copy of our annual renewal report for your records. Please correct your files and update our Corporation's file as soon as possible.

If you have any question, do not hesitate to contact us at your convenience,

Cordially,

Rodolfo García President

Enclosures