FILE NOW: FILING FEE AFTER MAY 1 IS \$550,00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9600098359 (8)

MEJIDO DENTAL LAB., INC.

FILED May 05 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 12944 S.W. 133RD COURT 12944 S.W. 133RD COURT MIAMI FL 33186-5806							
		***************************************			Date Incorporated or Qualified 12/02/1996	3a. Date of Last F	Report
2. Principal P	Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·		4. FEI Number		pplied For
21	W _ b _	Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	65-07/3567		lot Applicable
Suite, Apt.	#, U G	27		:	5. Certificate of Status Desired		Additional lequired
City & Stat	e	City & State		 	6. Election Campaign Financing	\$5.00	May Be
23		28		·	Trust Fund Contribution	Added Added	to Fees
Zip	Country	Ζφ .	30 Cou	nary	8. This corporation has liability for in Florida Statutes	ntangible tax under : Yes 🔲 No	s. 199.032,
24	25 9. Name and Address of Currer	29 29 Agent	[30]	 	10. Name and Address of New Reg		
ME.H	IDO, DAISY F			1 Name			
	14 S.W. 133RD COURT			\$2 Street Add	ress (P.O. Box Number is Not Acceptable	(o)	· · · · · · · · · · · · · · · · · · ·
	M FL 33186				reas (1.0. box riumber is not Appellab		
				43			
				84 City		85 Zip	Code
						FL	
agent La	registered agent, or both, in the state am familiar with, and accept the oblig Separate typed or printed name of registered age			ujes.	poration submits this statement for the pition's board of directors. I hereby acception's	DATE	s registered
12.		D DIRECTORS	13,	Address selections reado	ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	PD	DELETE	1.1 11	ruf		Change	
NAME	MEJIDO, RAFAEL		1.2 N	u ∧ E			
STREET ADDRESS	12944 S.W. 133RD COURT		135	REET ADDRESS			
OTY-ST-769	MIAMI FL 33186			TY-SY-ZIP			
TITLE	VTD	DELETE	2 1 TI	!		Change	Addition
NAME	MEJIDO, DAISY F L. 12944 S.W. 133RD COURT		2.2 N	Ī I			
STREET ADDRESS City - St-Zip	MIAMI FL 33186		1	REET ADDRESS		4	
DILE	WWW. I E GO I GO	DELETE	3.1 TI			Change	Addition
NAME		 ,	3.2 N/				
STREET ADDRESS			1	REET ADDRESS	•		
CHY-ST-ZIP				ITY-ST-ZIP			
TITLE		DELETE	4,1 Tf	TLE		Change	Addition
NAME			4.2 N	AME			
STREET ADDRESS			4.3 \$	REET ADDRESS			
CITY - S1 - 70°				TY ST-ZIP.			
TITLE		DELETE	5.1 11	i		☐ Change	Addition
NAME			5.2 N				
STREET ADDRESS				REET ADDRESS			
CHY-SI-789		DELETE		TY ST-ZIP		Change	Addition
THE		☐ perese	611			L., Uriange	L.J ADUIION
NAME Charles attorned			6.2 N	I			
STREET ADORESS				TREET ADDRESS			
CITY-ST-ZIP	1		6.4 C	TY ST-ZIP		12.50	

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Daisy J Sken My 10.

Date 305-255-877-