2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000049526

Entity Name: CARTIER DENTAL LABORATORY, INC.

CAPE CORAL, FL 33990

City-St-Zip:

FILED Jan 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 306 SOUTHEAST 15TH PLACE CAPE CORAL, FL 33990 **Current Mailing Address: New Mailing Address:** 306 SOUTHEAST 15TH PLACE CAPE CORAL, FL 33990 FEI Number: 65-0758882 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CARTIER, MARTINE 306 S.E. 15TH PLACE CAPE CORAL, FL 33990 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CARTIER, DANY Name: Name: 306 SOUTHEAST 15TH PLACE Address: Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: Title: SVD () Delete Title: () Change () Addition Name: CARTIER, MARTINE Name: 306 SOUTHEAST 15TH PLACE Address: 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: MARTINE CARTIER SVD 01/28/2008