2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P98000005874

Entity Name: SOUTH PARK DENTAL LAB., INC.

Current Principal Place of Business:

1180 SPRING CENTRE SOUTH BLVD
SUITE #380
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

3370 OAKMONT TERRACE
LONGWOOD, FL 32779

Current Mailing Address:

1180 SPRING CENTRE SOUTH BLVD
SUITE #380
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

3370 OAKMONT TERRACE
LONGWOOD, FL 32779

FEI Number: 59-3505758 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KIHWAN, KIM
1180 SPRING CENTRE SOUTH BLVD
#380
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DVP ( ) Delete
Name: KIHWAN, KIM
Address: 652 STONEFIELD LOOP
City-St-Zip: LAKE MARY, FL 32746

Title: DVP ( ) Delete
Name: ELIN-JOO, KIM
Address: 652 STONEFIELD LOOP
City-St-Zip: HEATHROW, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition
Name: KIHWAN, KIM
Address: 3370 OAKMONT TERRACE
City-St-Zip: LONGWOOD, FL 32779

Title: DVP (X) Change ( ) Addition
Name: EUN-JOO, KIM
Address: 3370 OAKMONT TERRACE
City-St-Zip: LONGWOOD, FL 32779

I hereby certify that the information supplied with this filing does not qualify for the 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: KIHWAN KIM P 05/01/2006

Electronic Signature of Signing Officer or Director — Date