

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000049992

FILED  
Mar 29, 2012  
Secretary of State

**Entity Name:** TEETH R US DENTAL LABORATORY & REFERRAL SERVICE, INC.

**Current Principal Place of Business:**

17325 NW 27TH AVENUE  
SUITE 201  
OPA LOCKA, FL 33056 US

**New Principal Place of Business:**

**Current Mailing Address:**

17325 NW 27TH AVENUE  
SUITE 201  
OPA LOCKA, FL 33056 US

**New Mailing Address:**

**FEI Number:** 65-0345015

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FORSHEE, GLENN  
17325 NW 27TH AVENUE  
SUITE 201  
MIAMI, FL 33056 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: FORSHEE, GLENN  
Address: 19703 NW 32 PLACE  
City-St-Zip: MIAMI, FL 33056

Title: STD  
Name: FORSHEE, CHERYL  
Address: 19703 NW 32 PLACE  
City-St-Zip: MIAMI, FL 33056

I hereby 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 all other like empowered.

SIGNATURE: GLENN FORSHEE

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03/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date