## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000049827

Entity Name: P.A.D.L. MANAGEMENT CORPORATION

FILED May 02, 2007 Secretary of State

**Current Principal Place of Business:** 

New Principal Place of Business:
PRO ART DENTAL LAB. INC.

PRO ART DENTAL LAB, INC.

2101 E HALLANDALE BÉACH BLVD, SUITE 302

HALLANDALE, FL 33009

Current Mailing Address:

New Mailing Address:

DEL TORO, MARINA

PRO ART DENTAL LAB, INC.

2101 E HALLANDALE BEACH BLVD., SUITE 302

HALLANDALE, FL 33009

PRO ART DENTAL LAB, INC. 19333 COLLINS AVENUE, APT.1910 SUNNY ISLES BEACH, FL 33160

19333 COLLINS AVENUE, APT. 1910

SUNNY ISLES BEACH, FL 33160

FEI Number: 65-0924820 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:

DEL TORO, MARINA 2101 E. HALLANDALE BEACH BLVD.

STE 302 HALLANDALE, FL 33009 US 19333 COLLINS AVENUE APT.1910

SUNNY ISLES BEACH, FL 33160 US

DEL TORO, MARINA

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: MARINA DEL TORO

05/02/2007

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

19333 COLLINS AVENUE, APT.1910

SUNNY ISLES BEACH, FL 33160

(X) Change ( ) Addition

Title: DPS () Delete Name: DEL TORO, MARINA

Address: 2101 E HALLANDALE BEACH BLVD, SUITE 302

City-St-Zip: HALLANDALE, FL 33009

Title:

VPT ( ) Delete Title: VPT (X) Change ( ) Addition

Name: DEL TORO, MARINA Name: DEL TORO, MARINA

 Address:
 6701 SUNSET DR.,STE.111
 Address:
 19333 COLLINS AVENUE, APT. 1910

 City-St-Zip:
 MIAMI, FL 33143
 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160

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: MARINA DEL TORO P 05/02/2007