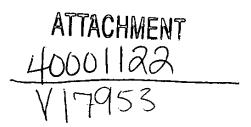
2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Jan 10, 2007 8:00 am Secretary of State 01-10-2007 90051 005 ***150.00 DOCUMENT #V17953 1. Entity Name DENTECH LABS, INC. 40001122 Principal Place of Business Mailing Address 3707 SW 1 STR 3707 SW 1 STR MIAMI, FL 33134 MIAMI, FL 33134 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 5520 West Flagler St // 18719 N.W. 14 St Suite, Apr. #, etc. Suite, Apt. #, etc. 01032007 CR2E034 (12/06) Chg-P Suite D City & State City & State 4. FEI Number Applied For Miami, FLPembroke Pines, FL 65-0318519 Not Applicable CountryUSA Country USA 33029 \$8.75 Additional 5. Certificate of Status Desired П 33134 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ENNIS-VOLCY, WENDY, ESQUIRE Street Address (P.O. Box Number is Not Acceptable) 18719 NW 14 ST HOLLYWOOD, FL 33029 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME VOLCY, CHARLES NAME Charles Volcy STREET ADDRESS 3707 SW 1 STR STREET ADDRESS 18719 NW 14 Street CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP Pembroke Pines, FL 33029 D Delete TITLE ☐ Addition VARONA, ANTONIO NAME NAME 3707 SW 1 STR STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI, FL CITY - ST - ZIP TITLE ☐ Delete TOLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITE □ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZTP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 shape fereodo execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed or on an attachment with an additional or the property of the propert

FILED

Wendy Ennis-Volcy
Attorney at Law



January 5, 2007

Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Annual report for Dentech Labs, Inc.

Dear Division of Corporations:

Enclosed you will find the 2007 for profit corporation annual report along with our check for the same.

Please note that there are address changes to the principal place of business and the mailing address as well as the deletion of a director. Of particular importance, please note that the principal place of business is 5520 West Flagler Street. The word "Street" bled over to the mailing address cell and should not be mistaken for a part of the mailing address when entering this information on the system.

Should you have any questions concerning this matter, please do not hesitate to contact the undersigned directly at: (954) 436-2003.

Yours very truly,

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