

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000065147

**Entity Name:** A & S DENTAL LAB, INC.

**Current Principal Place of Business:**

6531 SUNSET STRIP  
SUITE 5  
SUNRISE, FL 33313

**Current Mailing Address:**

11461 N.W. 38TH STREET  
UNIT W  
CORAL SPRINGS, FL 33065

**FEI Number:** 65-1117894

**Certificate of Status Desired:** No

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

ISAAC, FRED  
11461 NW 38 STREET  
UNIT W  
CORAL SPRINGS, FL 33065 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

**Officer/Director Detail :**

Title            PRES  
Name            ISAAC, FRED  
Address        6531 SUNSET STRIP STE 5  
City-State-Zip:    SUNRISE FL 33313

*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:** FRED ISAAC

**PRES**

**01/29/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date