

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 329771

FILED  
Apr 08, 2005  
Secretary of State

Entity Name:  A DENTAL LAB, INC.

**Current Principal Place of Business:**

3170 SIXMA RD.  
P.O. BOX 190  
LAKE HELEN, FL 32744

**New Principal Place of Business:**

**Current Mailing Address:**

3170 SIXMA RD.  
P.O. BOX 190  
LAKE HELEN, FL 32744

**New Mailing Address:**

FEI Number: 59-1207386      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KNIGHT, JAMES E  
3601 SE OCEAN BLVD., #200  
STUART, FL 34996    US

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

KUNZIG, DIANA J  
P. O. BOX 190  
LAKE HELEN, FL 32744    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: DIANA J. KUNZIG

04/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: KUNZIG, DONALD M,  
Address: 3170 SIXMA RD.  
City-St-Zip: LAKE HELEN, FL 32744

Title: SVD      ( ) Delete  
Name: KUNZIG, DIANA J,  
Address: 3170 SIXMA RD.  
City-St-Zip: LAKE HELEN, FL 32744

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANA J. KUNZIG

SVD

04/08/2005

Electronic Signature of Signing Officer or Director

Date