


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2005 08:00 AM
Secretary of State

DOCUMENT # 306780
 1. Entity Name
DADE TEST & BALANCE CORPORATION



Principal Place of Business Mailing Address
37 E. ACRE DR. **37 E. ACRE DR.**
PLANTATION, FL 33317 **PLANTATION, FL 33317**

DO NOT WRITE IN THIS SPACE



01292005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
59-1152454 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
WORTHY, PETER H.
37 EAST ACRE DRIVE
PLANTATION, FL 33317

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

1100000223297
 02/10/05-80038-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WORTHY, PETER H. 3626 LAWSON BLVD DELRAY BEACH, FL 33445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WORTHY, PETER 1400 NW 122 AVE PLANTATION, FL 33323
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 empowered to 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 my address, with all other like empowered.

SIGNATURE:  **Peter H Worthy** 2/8/05 954 791 3194
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #