2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #306780

1. Entity Name

DADÉ TEST & BALANCE CORPORATION



FILED Feb 18, 2008 08:00 A Secretary of State

Principal Place of Business

37 E. ACRE DR. PLANTATION, FL 33317 Mailing Address

37 E. ACRE DR.

PLANTATION, FL 33317



DO NOT WRITE IN THIS SPACE

01152008 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 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

SIGNATURE:

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WORTHY, PETER H. 3626 LOWSON BLVD DELRAY BEACH, FL 33445				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WORTHY, PETER 1400 NW 122 AVE PLANTATION, FL 33323			U00000830778 02/26/08-80098-008 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					
NAME				•	
STREET ADDRESS					
CITY-ST-ZIP	<u> </u>				
12. I hereby certify that the information supplied with this filing 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 prustee 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 the address, with all other like empowered.					