

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 306780

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: DADE TEST & BALANCE CORPORATION

**Current Principal Place of Business:**

37 E. ACRE DR.  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

37 E. ACRE DR.  
PLANTATION, FL 33317

**New Mailing Address:**

FEI Number: 59-1152454

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WORTHY, PETER H.  
37 EAST ACRE DRIVE  
PLANTATION, FL 33317 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WORTHY, PETER H.  
Address: 3626 LOWSON BLVD  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP ( ) Delete  
Name: WORTHY, PETER  
Address: 1400 NW 122 AVE  
City-St-Zip: PLANTATION, FL 33323

**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 exemption stated 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 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: PETER H WORTHY

PRES

02/02/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date