## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000010796

FILED Feb 29, 2008 Secretary of State

Entity Nam	1e: ACCESS	MEDICAL LABORATORIES, IN	IC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2151 ALT A # 1500 JUPITER, F	11A SOUTH				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2151 ALT A # 1500 JUPITER, F					
FEI Number:	59-3764882	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
SPIEGEL & UTRERA, P.A. 1840 CORAL WAY 4TH FLOOR MIAMI, FL 33145 US			860 US HIGHWAY 1 SUITE 108		
The above in the State		submits this statement for the pr	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: KURTIS O. ALTHOUSE				02/29/2008	
	Electron	ic Signature of Registered Age	nt	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD () ELHOSSEINY, I 2151 ALT A1A S JUPITER, FL 3	S # 1500	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VSD () ELHOSSEINY, 2151 ALT A1A S JUPITER, FL 3	S # 1500	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: MOHAMED ELHOSSEINY Ρ 02/29/2008