

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



APPROVED
AND
FILED

95 MAR -7 PM 1:45

DOCUMENT # **P94000088460 (8)**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MDR LABS, INC.

14101 N.W. 4TH STREET
SUNRISE FL 33323

14101 N.W. 4TH STREET
SUNRISE FL 33323

12/05/1994

21 22 23 24 25 26 27 28 29 30

3a. Date of Last Report
3b. Date of Last Report
4. FFL Number
5. Certificate of Status Desired
6. Location Campaign Financing Trust Fund Contribution
7. This corporation has liability for estate tax under S. 1993 of Florida Statutes

9. Name and Address of Current Registered Agent
**PSALTIDES, JASON K
14101 N.W. 4TH STREET
SUNRISE FL 33323**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code **33325**

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered agent and that I have accepted the appointment as registered agent of the corporation under the provisions of Section 607.0605, Florida Statutes.

12. OFFICERS AND DIRECTORS
D
RILEY, JAMES B
447 CENTER ISLAND
GOLDEN BEACH FL 33160

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP
15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY, ST, ZIP
19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY, ST, ZIP
23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY, ST, ZIP
27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY, ST, ZIP

D
RILEY, PATRICIA A
447 CENTER ISLAND
GOLDEN BEACH FL 33160

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP
15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY, ST, ZIP
19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY, ST, ZIP
23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY, ST, ZIP
27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY, ST, ZIP

14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered agent and that I have accepted the appointment as registered agent of the corporation under the provisions of Section 607.0605, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-95 305-624-4466