

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000019609

1. Entity Name

N-B3 LABORATORY CORP.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90050 033 ***150.00

Principal Place of Business
3100 N.W. 2nd Avenue
Suite 216
Boca Raton, Florida 33431

Mailing Address
3100 N.W. 2nd Avenue
Suite 216
Boca Raton, Florida 33431

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0846447

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of Now Registered Agent

Edwin R. Jonas III Esq.
100 N.E. Fifth Avenue, Suite B-1
Delray Beach, FL 33483

Name

E.H.G. Resident Agents, Inc.

Street Address (P.O. Box Number is Not Acceptable)

5100 Town Center Circle, Suite 330

City

Boca Raton,

FL

Zip Code
33486

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.

SIGNATURE

Edward H. Gilbert, Esq., President

4/27/00

Signature, typed or printed name of registrant agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Joseph Scivoletto 10249 El Paraiso Place Delray Beach, FL 33446	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Joseph Scivoletto 10249 El Paraiso Place Delray Beach, FL 33446	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Edwin R. Jonas III 100 N.E. Fifth Avenue, Suite B-1 Delray Beach, FL 33483	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Rose Marie Scivoletto 10249 El Paraiso Place Delray Beach, FL 33446	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

04/27/00

(561) 394-4623

Date

Signature Phone #

Joseph Scivoletto, President