2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072797

CHANCIS, JOEY

2999 NE 191 ST, STE, 800

AVENTURA, FL 33180

Name:

Address: City-St-Zip:

Entity Name: J LABORATORIES INTERNATIONAL INC.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2999 NE 191ST ST, STE 800 2999 NE 191ST ST, STE 800 AVENTURA, FL 33180 STE. 800 AVENTURA, FL 33180 **Current Mailing Address: New Mailing Address:** 2999 NE 191ST ST, STE 800 2999 NE 191ST ST, STE 800 AVENTURA, FL 33180 STE. 800 AVENTURA, FL 33180 FEI Number: 56-2373796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: ROER, RICHARD ROER, RICHARD 2999 NE 191ST ST, STE 800 2999 NE 191ST ST, STE 800 AVENTURA, FL 33180 STE. 800 AVENTURA, FL 33180 US 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: 01/04/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ROER, RICHARD Name: Name: 2999 NE 191ST ST, STE 800 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ROER, ARLYNE Name: 2999 NE 191 ST. STE. 800 Address: Address: AVENTURA, FL 33180 City-St-Zip: City-St-Zip: Title: Title: () Delete () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD ROER P 01/04/2008