

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 190261

FILED  
Sep 27, 2006  
Secretary of State

**Entity Name:** APPLIED RESEARCH LABORATORIES, INC.

**Current Principal Place of Business:**

5371 NW 161ST STREET  
MIAMI, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

5371 NW 161ST STREET  
MIAMI, FL 33014

**New Mailing Address:**

**FEI Number:** 59-0765380

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SONDAK, ROBERT M  
9400 SOUTH DADELAND BLVD, STE 600  
MIAMI, FL 33156 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: ROBERT M. SONDAK

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SUKERT, JORDAN V.,  
Address: 5371 NW 161ST STREET  
City-St-Zip: MIAMI, FL 33014

Title: S ( ) Delete  
Name: SUKERT, JUNE T.,  
Address: 5371 NW 161 STREET  
City-St-Zip: MIAMI, FL

Title: P ( ) Delete  
Name: SUKERT, ALAN  
Address: 5371 NW 161ST STREET  
City-St-Zip: MIAMI, FL 33014

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: ALAN B. SUKERT

P

09/27/2006

Electronic Signature of Signing Officer or Director

Date