2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# 520742

Entity Name: GULF COAST TESTING LABORATORY, INC.

Current Principal Place of Business:

5745 PARK BLVD (33781)
PINELLAS PARK, FL 33780

New Principal Place of Business:

5745 PARK BLVD (33781)
PINELLAS PARK, FL 33781

Current Mailing Address:

5745 PARK BLVD (33781)
PO BOX 6
PINELLAS PARK, FL 33780

New Mailing Address:

FEI Number: 59-1711480 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DAVIS, RICK L
5745 PARK BLVD
PINELLAS PARK, FL 33781 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	GOEL, RAM A DR	
Address:	16306 DOUNE COURT	
City-St-Zip:	TAMPA, FL 33647	
Title:	PD	( ) Delete
Name:	DAVIS, RICK L	
Address:	5745 PARK BLVD	
City-St-Zip:	PINELLAS PARK, FL 33781	
Title:	D	( ) Delete
Name:	GALVEZ, ANTHONY	
Address:	204 S WARD STREET	
City-St-Zip:	TAMPA, FL 33609	
Title:	ST	( ) Delete
Name:	DAVIS, JULIANNE	
Address:	8069 81ST WAY	
City-St-Zip:	SEMINOLE, FL 33777	

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

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: RICK L. DAVIS PD 04/24/2008

Electronic Signature of Signing Officer or Director — Date