

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855030

FILED
Jul 09, 2004
Secretary of State

Entity Name: MEDICAL LABORATORIES CORPORATION

Current Principal Place of Business:

14225 NEWBROOK DR
CHANTILLY, VA 201512230 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 10841
CHANTILLY, VA 201530841 US

New Mailing Address:

FEI Number: 54-0854787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO () Delete
Name: FREEMAN, KENNETH W
Address: ONE MALCOLM AVE
City-St-Zip: TETERBORO, NJ 076081070

Title: VPD () Delete
Name: HAGEMANN, ROBERT A
Address: ONE MALCOLM AVE
City-St-Zip: TETERBORO, NJ 076081070

Title: S () Delete
Name: FARRENKUPT, JR, LEO C
Address: ONE MALCOLM AVE
City-St-Zip: TETERBORO, NJ 076081070

Title: P () Delete
Name: BRODNICK, TIMOTHY J
Address: 14225 NEWBROOK DRIVE
City-St-Zip: CHANTILLY, VA 201512230

Title: AT () Delete
Name: CALAMARI, STEPHEN A
Address: 1290 WALL ST-WEST 5TH FLOOR
City-St-Zip: LYNDHURST, NJ 07071

Title: D () Delete
Name: MOHEPUTRA, SURYA N
Address: ONE MALCOLM AVE
City-St-Zip: TETERBORO, NJ 076081070

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: MOHAPATRA, SURYA
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

Title: VPD (X) Change () Addition
Name: HAGEMANN, ROBERT A
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

Title: AS (X) Change () Addition
Name: FARRENKUPT, JR, LEO C
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

Title: T (X) Change () Addition
Name: MANORY, JOSEPH P
Address: 1290 WALL STREET WEST
City-St-Zip: LYNDHURST, NJ 07071

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 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 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: SIRISHA GUMMAREGULA

S

07/09/2004

Electronic Signature of Signing Officer or Director

Date