

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004179

FILED  
Feb 26, 2004  
Secretary of State

Entity Name: TESTWELL LABORATORIES, INC.

## Current Principal Place of Business:

47 HUDSON STREET  
OSSINING, NY 10562

## New Principal Place of Business:

## Current Mailing Address:

47 HUDSON STREET  
OSSINING, NY 10562

## New Mailing Address:

FEI Number: 13-3980536

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KANCHARLA, VIDYASAGAR R  
1226 SOUTH DIXIE HIGHWAY  
HOLLYWOOD, FL 33020 US

## Name and Address of New Registered Agent:

KANCHARLA, VIDYASAGAR R  
1226 SOUTH DIXIE HIGHWAY  
HOLLYWOOD, FL 33020 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: VIDYASAGAR R. KANCHARLA

02/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSCD ( ) Delete  
Name: KANCHARLA, VIDYASAGAR R  
Address: 180 NORTH RIVERSIDE AVENUE  
City-St-Zip: CROTON ON HUDSON, NY 10520

Title: D ( ) Delete  
Name: KANCHARLA, MADHAVI  
Address: 180 NORTH RIVERSIDE AVENUE  
City-St-Zip: CROTON ON HUDSON, NY 10520

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: KANCHARLA, MADHAVI R  
Address: 180 NORTH RIVERSIDE AVENUE  
City-St-Zip: CROTON ON HUDSON, NY 10520

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: VIDYASAGAR R KANCHARLA

PSCD

02/26/2004

Electronic Signature of Signing Officer or Director

Date