

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000002459

Entity Name: CIMS LAB, INC.

FILED
Nov 23, 2005
Secretary of State

Current Principal Place of Business:

3013 DOUGLAS BLVD., SUITE 120
ROSEVILLE, CA 95661

New Principal Place of Business:

Current Mailing Address:

3013 DOUGLAS BLVD., SUITE 120
ROSEVILLE, CA 95661

New Mailing Address:

FEI Number: 94-3322187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNCH, MIKE
90 ALTON ROAD, #3404
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

LYNCH, MIKE
90 ALTON ROAD, #3104
MIAMI BEACH, FL 33139 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: MIKE LYNCH

11/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LYNCH, KENNETH J
Address: 3013 DOUGLAS BOULEVARD, SUITE 120
City-St-Zip: ROSEVILLE, CA 95661

Title: V () Delete
Name: LYNCH, MARK E
Address: 3013 DOUGLAS BOULEVARD, SUITE 120
City-St-Zip: ROSEVILLE, CA 95661

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARK LYNCH

V

11/23/2005

Electronic Signature of Signing Officer or Director

Date