

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**  
**May 21, 2008**  
**Secretary of State**

DOCUMENT# F05000006447

Entity Name: MA LABORATORIES INC.

**Current Principal Place of Business:**

2075 N. CAPITOL AVE.  
SAN JOSE, CA 95132

**New Principal Place of Business:**

**Current Mailing Address:**

2075 N. CAPITOL AVE.  
SAN JOSE, CA 95132

**New Mailing Address:**

FEI Number: 93-0989650

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MERCHAN, JORGE  
8501 NW 17TH ST  
SUITE 128  
MIAMI, FL 33126 US

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

MERCHAN, JORGE  
1701 NW 84TH AVE  
MIAMI, FL 33126 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: MERCHAN JORGE

05/21/2008

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: CPS ( ) Delete  
Name: MA, ABRAHAM C  
Address: 2075 N. CAPITOL AVE.  
City-St-Zip: SAN JOSE, CA 95132

Title: WV ( ) Delete  
Name: RAO, CHRISTINE  
Address: 2075 N. CAPITOL AVE.  
City-St-Zip: SAN JOSE, CA 95132

Title: D ( ) Delete  
Name: LIN, MIKE  
Address: 2075 N. CAPITOL AVE.  
City-St-Zip: SAN JOSE, CA 95132

Title: T ( ) Delete  
Name: HUA, TONY  
Address: 2075 N. CAPITOL AVE.  
City-St-Zip: SAN JOSE, CA 95132

**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: TONY HUA

T

05/21/2008

Electronic Signature of Signing Officer or Director

Date