

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001455

FILED
Feb 17, 2009
Secretary of State

Entity Name: AGE DIAGNOSTIC LABORATORIES, INC.

Current Principal Place of Business:

301 YAMATO ROAD
2199
BOCA RATON, FL 33431

New Principal Place of Business:

301 NE 51ST STREET
2198
BOCA RATON, FL 33431

Current Mailing Address:

301 YAMATO ROAD
2199
BOCA RATON, FL 33431

New Mailing Address:

301 NE 51ST STREET
2198
BOCA RATON, FL 33431

FEI Number: 05-0627301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOREEN, BROWN
301 YAMATO ROAD
2199
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

STEVENS, ELIZABETH C
301 NE 51ST STREET
2198
BOCA RATON, FL 33431 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: ELIZABETH C. STEVENS

02/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANTONOPOULOS, VASILIOS
Address: 301 YAMATO RD, STE. 2199
City-St-Zip: BOCA RATON, FL 33431

Title: VPD () Delete
Name: GELAGOTIS, PETER
Address: 301 YAMATO RD, STE. 2199
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANTONOPOULOS, VASILIOS
Address: 301 NE 51ST STREET, STE. 2198
City-St-Zip: BOCA RATON, FL 33431

Title: VPD (X) Change () Addition
Name: GELAGOTIS, PETER
Address: 301 NE 51ST STREET, STE. 2198
City-St-Zip: BOCA RATON, FL 33431

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: VASILIOS ANTONOPOULOS

PD

02/17/2009

Electronic Signature of Signing Officer or Director

Date