

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001447

FILED
Mar 22, 2010
Secretary of State

Entity Name: DOCTORSCHOICELAB, INC.

Current Principal Place of Business:

2030 W MCNAB ROAD
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

2030 W MCNAB ROAD
FT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 51-0624228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DREWS, RUTH
2030 W MCNAB ROAD
FT LAUDERDALE, FL 33309 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: C
Name: BURSTEIN, JACK
Address: 2030 W MCNAB ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: DS
Name: ROBINSON, RICKI M.D.
Address: 2030 W MCNAB ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: DP
Name: GINSBURG, MARK J M.D.
Address: 2030 W MCNAB ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

Title: DVPT
Name: ENIS, JAY
Address: 2030 W MCNAB ROAD
City-St-Zip: FT LAUDERDALE, FL 33309

I hereby 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 all other like empowered.

SIGNATURE: MARK J GINSBURG MD

DP

03/22/2010

Electronic Signature of Signing Officer or Director

Date