2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F53453

City-St-Zip: ST. PETERSBURG, FL 33710

Entity Name: ADVANCED LAB SERVICES, INC.

FILED Mar 21, 2005 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place o	New Principal Place of Business:	
407 PASADENA AVENUE SOUTH				6798 CROSSWINDS DR. N.	
ST PETER	RSBURG, FL 3	33707	A103 ST PETERSBURG, FL	33710	
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
407 PASADENA AVENUE SOUTH ST PETERSBURG, FL 33707			1218 67TH STREET N. ST PETERSBURG, FL 33710		
FEI Number:	: 59-2162218	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	l Address of C	urrent Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
GULFPOR	FPORT BLVD. RT, FL 33707 a named entity s	US	purpose of changing its registered	office or registered agent, or both,	
	e of Florida.				
SIGNATU					
	Electror	ic Signature of Registered Ag	gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PROCTOR, ST 1218 67TH ST.		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	T () PROCTOR, MA 1218 67TH ST		Title: (Name: Address:) Change ()Addition	

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: MARIE PROCTOR T 03/21/2005