

NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 FEE DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
Sep 13, 1999 8:00 am
Secretary of State

09-13-1999 90003 033 ***550.00

DOCUMENT # **F94000001261**
 Corporation Name
U.S. LABORATORIES (DELAWARE) INC.



Principal Place of Business Mailing Address
50 W SUNRISE BLVD SUITE 107 PLANTATION FL 33313
4350 W SUNRISE BLVD SUITE 107 PLANTATION FL 33313 US

DO NOT WRITE IN THIS SPACE

Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
		03/14/1994	33-0586167	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
		<input type="checkbox"/>		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
		<input type="checkbox"/>		
Zip	Country	7. This corporation owes the current year Intangible Personal Property.	<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 4350 W SUNRISE BLVD, SUITE 107 PLANTATION FL 33313		81 Name		
		82 Street Address (P.O. Box Number is Not Acceptable)	1201 Hays Street	
		83		
		84 City	Tallahassee	85 Zip Code

Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE: **8-27-99**

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
PTD WRIGHT, DICKERSON 4350 WEST SUNRISE BLVD. STE 107 PLANTATION FL	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	CEO, President, Chairman of the Board Wright, Dickerson 4350 W. Sunrise, #107, Plantation, FL 33313
S WRIGHT, KATHERINE 4350 W SUNRISE BLVD, SUITE 107 PLANTATION FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Executive VP, Director Elzweig, Gary 4350 W. Sunrise Blvd., #107 Plantation, FL 33313
	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Executive VP, Secretary, Director Baron, Mark 4350 W. Sunrise Blvd., #107 Plantation, FL 33313
	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Executive VP, Director Lowenthal, Martin B. 4350 W. Sunrise Blvd., #107 Plantation, FL 33313
	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	CFO, Director Wasilewski, Joseph 4350 W. Sunrise Blvd., #107 Plantation, FL 33313
SEE ATTACHED FOR ADDITIONAL DIRECTORS	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Director Chapman, Thomas H. 4350 W. Sunrise Blvd., #107 Plantation, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **Joseph Wasilewski** 9/ 199 732-382-3553

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CR2E034 (5/99)

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U.S. LABORATORIES, INC.

File No. F9400000 1261

ADDITIONAL DIRECTORS

Fuchs, Irvin	4350 W. Sunrise Blvd., #107, Plantation, FL 33313
McCumber, James L.	4350 W. Sunrise Blvd., #107, Plantation, FL 33313
Petersen, Robert E.	4350 W. Sunrise Blvd., #107, Plantation, FL 33313
Schwartz, Noel	4350 W. Sunrise Blvd., #107, Plantation, FL 33313