

2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 27, 2007 8:00 am**  
**Secretary of State**

04-27-2007 90211 029 \*\*\*150.00

**DOCUMENT # F94000001261**

1. Entity Name  
U.S. LABORATORIES (DELAWARE) INC.



Principal Place of Business  
% ORRICK, ATTN: B. HAIMES  
666 FIFTH AVE., #2139  
NEW YORK, NY 10103 US

Mailing Address  
% ORRICK, ATTN: B. HAIMES  
666 FIFTH AVE., #2139  
NEW YORK, NY 10103 US

40000000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04192007 Chg-P CR2E034 (12/06)

4. FEI Number  
33-0586167

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME DPC  
STREET ADDRESS WRIGHT, DICKERSON  
CITY- ST- ZIP 7895 CONVOY ST, STE 18  
SAN DIEGO, CA 92111 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME VP  
STREET ADDRESS O'BRIEN, MARYJO  
CITY- ST- ZIP 7895 CONVOY ST, STE 18  
SAN DIEGO, CA 92111 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME DC  
STREET ADDRESS PIEDELIEVRE, FRANK  
CITY- ST- ZIP 17 BIS, PL DES REFLETS, LA DEFENSE 2  
COURBEVOIE, FR 92400 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME DT  
STREET ADDRESS FRANCOIS, TARDAN  
CITY- ST- ZIP 17 BIS, PL DES REFLETS, LA DEFENSE 2  
COURBEVOIE, FR 92400 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE  
NAME S  
STREET ADDRESS HAIMES, BURTON K  
CITY- ST- ZIP ~~875 THIRD AVE., #1493~~  
NEW YORK, NY 10022 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☒ Change ☐ Addition  
c/o ORRICK, 666 FIFTH AVE., #2139  
NEW YORK, NY 10103

TITLE  
NAME EVP  
STREET ADDRESS TONG, RICHARD  
CITY- ST- ZIP 11860 W. STATE RD 84, STE 1  
FORT LAUDERDALE, FL 33325 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Burton K. Haimes*

Burton K. Haimes

4-26-07 (212) 506-5055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT  
40086696

**DOCUMENT # F94000001261**

**Entity Name: U.S. LABORATORIES (DELAWARE) INC.**

Annex to Florida 2007 For Profit Corporation Annual Report

Block 11 – Additional Officer

Title	FINANCIAL CONTROLLER
Name	DAMASCENO, LUIS
Address	11860 W. STATE ROAD 84, STE. 1 FORT LAUDERDALE, FL 33325