

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F95000001778

1. Entity Name
ADMIRAL TESTING SERVICES, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 FEB -6 PM 1:19

Principal Place of Business
5909-C BRECKENRIDGE PKWY.
TAMPA, FL 33610 US

Mailing Address
5909-C BRECKENRIDGE PKWY.
TAMPA, FL 33610 US

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

3. Mailing Address

12111 River Road



02042008 Chg-P CR2E034 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Luling, Louisiana

4. FEI Number

72-1281343

Applied For

Not Applicable

Zip

Country

Zip

Country

70070

USA

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

SINOPOLI, FRANK
5909-C BRECKENRIDGE PKWY.
TAMPA, FL 33610

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

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME RAMOS, RENATO M
STREET ADDRESS 12111 RIVER RD
CITY-ST-ZIP LULING, LA 70070 ☐ Delete

TITLE DS
NAME RAMOS, RAMONA H
STREET ADDRESS 12111 RIVER RD
CITY-ST-ZIP LULING, LA 70070 ☐ Delete

TITLE DT
NAME KENNEY, LINDA B
STREET ADDRESS 12111 RIVER RD
CITY-ST-ZIP LULING, LA 70070 ☒ Delete

TITLE D
NAME RAMOS, RENATO M JR
STREET ADDRESS 12111 RIVER RD
CITY-ST-ZIP LULING, LA 70070 ☐ Delete

TITLE D
NAME KENNEY, STANLEY
STREET ADDRESS 12111 RIVER RD
CITY-ST-ZIP LULING, LA 70070 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President + CEO
NAME
STREET ADDRESS 500118345255
CITY-ST-ZIP 02/19/08--01045--016 **70.00 ☒ Change ☐ Addition

TITLE Secretary / Director
NAME
STREET ADDRESS 105 Somerset
CITY-ST-ZIP Laplace, LA 70068 ☒ Change ☐ Addition

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

TITLE Vice President
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Renato M. Ramos

2-4-08

Date

985-785-8302

Daytime Phone #