

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F95000005406

FILED
Dec 09, 2004
Secretary of State

Entity Name: BIO-REFERENCE LABORATORIES, INC.

Current Principal Place of Business:

481 EDWARD H. ROSS DR.
ELMWOOD PARK, NJ 07407

New Principal Place of Business:

Current Mailing Address:

481 EDWARD H. ROSS DR.
ELMWOOD PARK, NJ 07407

New Mailing Address:

FEI Number: 22-2405059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: GRODMAN, MARC D
Address: 481 EDWARD H. ROSS DR.
City-St-Zip: ELMWOOD PARK, NJ 07407

Title: PDC () Delete
Name: DUBINETT, HOWARD
Address: 481 EDWARD H. ROSS DR.
City-St-Zip: ELMWOOD PARK, NJ 07407

Title: STD () Delete
Name: SINGER, SAM
Address: 481 EDWARD H. ROSS DR.
City-St-Zip: ELMWOOD PARK, NJ 07407

Title: D () Delete
Name: TOPFER, MORTON
Address: 481 EDWARD H. ROSS DR.
City-St-Zip: ELMWOOD PARK, NJ 07407

Title: D () Delete
Name: ROGLIERI, JOHN
Address: 481 EDWARD H. ROSS DRIVE
City-St-Zip: ELMWOOD PARK, NJ

Title: D () Delete
Name: GARY LEDERMAN,
Address: 401 EDWARD H. ROSS DR.
City-St-Zip: ELMWOOD PARK, NJ 07407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ELIAS, HARRY
Address: 481 EDWARD H. ROSS DR.
City-St-Zip: ELMWOOD PARK, NJ 07407

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: SAM SINGER

STD

12/09/2004

Electronic Signature of Signing Officer or Director

Date