

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000000872

1. Entity Name

LABSYSTEMS INC. ✓

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90010 008 ***550.00

Principal Place of Business

8 EAST FORGE PKWY
FRANKLIN MA 02038

Mailing Address

C/O TAX DEPT
81 WYMAN ST
WALTHAM MA 02454

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3199207

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

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME HOWE, BARRY S
STREET ADDRESS 81 WYMAN STREET
CITY-ST-ZIP WALTHAM MA

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 8 Forge Parkway
CITY-ST-ZIP Franklin, MA 02038

TITLE AS ☐ Delete
NAME KELLEHER, PAUL F
STREET ADDRESS 81 WYMAN STREET
CITY-ST-ZIP WALTHAM MA

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 02454

TITLE S ☐ Delete
NAME LAMBERT, SANDRA L
STREET ADDRESS 81 WYMAN STREET
CITY-ST-ZIP WALTHAM MA

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 02454

TITLE AS ☒ Delete
NAME PARKINSON, LORAIN
STREET ADDRESS 81 WYMAN STREET
CITY-ST-ZIP WALTHAM MA

TITLE AS ☐ Change ☒ Addition
NAME Robert Aghababian
STREET ADDRESS 81 Wyman St.
CITY-ST-ZIP Waltham MA 02454

TITLE AS ☐ Delete
NAME HOOGASIAN, SETH H
STREET ADDRESS 81 WYMAN STREET
CITY-ST-ZIP WALTHAM MA

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP 02454

TITLE T ☐ Delete
NAME RIORDAN, MELISSA F
STREET ADDRESS 81 WYMAN STREET
CITY-ST-ZIP WALTHAM MA

TITLE ☒ Change ☐ Addition
NAME Kenneth Apicerno
STREET ADDRESS
CITY-ST-ZIP 02454

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert Aghababian
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-00

Date

(781) 622-1000

Daytime Phone #