2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000000437

1. Entity Name
LABTEST INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
70 DIAMOND ROAD SPRINGFIELD, NJ 07081	3933 US ROUTE 11 CORTLAND, NY 13045

08262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1541809
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

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

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $550.00
Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U08080171785
09/08/04-80002-006 550.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	KONG, RAYMOND
STREET ADDRESS	2/F GARMENT CENTRE, 576 CASTLE PEAK RD.
CITY-ST-ZIP	KOWLOON, HONG KONG,
TITLE	DT
NAME	COUROSSI, TIMOTHY
STREET ADDRESS	70 CODMAN HILL ROAD
CITY-ST-ZIP	BOXBOROUGH, MA 01719
TITLE	V
NAME	CORONA, ROQUE
STREET ADDRESS	63 FLORENCE DR
CITY-ST-ZIP	FLORHAM PARK, NJ 07932
TITLE	S
NAME	LAW, CHRISTINA
STREET ADDRESS	2/F GARMENT CENTRE, 576 CASTLE PEAK RD.
CITY-ST-ZIP	KOWLOON, HONG KONG,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 9/3/04 6077586428
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #