

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# H81222

Entity Name: THEON LABORATORIES, INC.

**FILED**  
**Jun 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4600 NORTH HABANA AVENUE, SUITE 17  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

4600 NORTH HABANA AVENUE, SUITE 17  
TAMPA, FL 33614

**New Mailing Address:**

PO BOX 18882  
TAMPA, FL 33679

FEI Number: 59-2612740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TAYLOR, DONALD W  
4600 NORTH HABANA AVE, #17  
TAMPA, FL 33614 US

**Name and Address of New Registered Agent:**

TAYLOR, BEVERLY D  
1603 S GEORGIA AVE  
TAMPA, FL 33629 US

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: BEVERLY D TAYLOR

06/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTS  
Name: TAYLOR, BEVERLY D  
Address: 1603 S GEORGIA AVE  
City-St-Zip: TAMPA, FL 33629

I hereby 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 all other like empowered.

SIGNATURE: BEVERLY D TAYLOR

PTS

06/28/2011

Electronic Signature of Signing Officer or Director

Date