

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J81483

Entity Name: PHARMALAB, INC.

FILED
Jul 25, 2007
Secretary of State

Current Principal Place of Business:

6032 JET PORT IND. BLVD
TAMPA, FL 33634

New Principal Place of Business:

4040 WEST WATERS AVE
#1700
TAMPA, FL 33614

Current Mailing Address:

6032 JET PORT IND. BLVD
TAMPA, FL 33634

New Mailing Address:

8870 NORTH HIMES AVE
#408
TAMPA, FL 33614

FEI Number: 59-2821514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ACEBO, ABELARDO LAZARO
6032 JET PORT INDSUTRIAL BLVD
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

ACEBO, ABELARDO LAZARO
4040 WEST WATERS AVE
#1700
TAMPA, FL 33614 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:

07/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ACEBO, ABELARDO LAZA, RO
Address: 19808 SUNSPASH LANE
City-St-Zip: LUTZ, FL 33558

Title: STD () Delete
Name: JACKSON, EDWARD R II
Address: 13601 DIAMOND HEAD DR
City-St-Zip: TAMPA, FL 33624

Title: SHD () Delete
Name: GAYHEART, STEPHEN P
Address: 3030 HARGETT LN
City-St-Zip: SAFETY HARBOR, FL 34695

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ABELARDO L ACEBO

PD

07/25/2007

Electronic Signature of Signing Officer or Director

Date