

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J93992

FILED  
Apr 06, 2012  
Secretary of State

**Entity Name:** MANUFACTURING LABORATORIES, INC.

**Current Principal Place of Business:**

889 S. RAINBOW BLVD., PMB 690  
LAS VEGAS, NV 89145 US

**New Principal Place of Business:**

**Current Mailing Address:**

889 S. RAINBOW BLVD., PMB 690  
LAS VEGAS, NV 89145 US

**New Mailing Address:**

**FEI Number:** 59-2844488

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DELIO, RICHARD  
3231 NE 57TH COURT  
FT. LAUDERDALE, FL 33308 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: DELIO, THOMAS S  
Address: P.O. BOX 371087  
City-St-Zip: LAS VEGAS, NV 89137

Title: VP  
Name: SMITH, KEVIN S  
Address: 15401 GROVELAND STREET  
City-St-Zip: HUNTERSVILLE, NC 28078

Title: SEC  
Name: DELIO, THOMAS S  
Address: PO BOX 371087  
City-St-Zip: LAS VEGAS, NV 89137

Title: TREA  
Name: SMITH, KEVIN S  
Address: 15401 GROVELAND STREET  
City-St-Zip: HUNTERSVILLE, NC 28078

Title: DIR  
Name: WINFOUGH, WILLIAM R  
Address: 12835 WINDING MANOR DRIVE  
City-St-Zip: HOUSTON, TX 77044

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: THOMAS S DELIO

PRES

04/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date