

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K11019

FILED
Apr 26, 2007
Secretary of State

Entity Name: KNL LABORATORY SERVICES, INC.

Current Principal Place of Business:

2742 N. FLORIDA AVE.
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

P O BOX 1833
TAMPA, FL 336011833

New Mailing Address:

P O BOX 1833
TAMPA, FL 33601

FEI Number: 59-2863292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KHAJEH-NOORI, KAMRAN
2742 N. FLORIDA AVE.
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

KHAJEH-NOORI, KAMRAN
2742 N. FLORIDA AVE.
TAMPA, FL 33602 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: KAMRAN KHEJAH-NOORI

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KHAJEH-NOORI, KAMRAN
Address: 2742 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33602

Title: ST () Delete
Name: HAYES, JAMES W
Address: 2742 N FLORIDA AVE
City-St-Zip: TAMPA, FL 33602

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: TYSON, ROAYA
Address: 2742 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33602

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV () Change (X) Addition
Name: TYSON, ANTHONY
Address: 2742 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33602

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: ROAYA TYSON

PST

04/26/2007

Electronic Signature of Signing Officer or Director

Date