

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039362

FILED  
Jul 06, 2005  
Secretary of State

Entity Name: INTERMEDIA LAB SERVICES, LLC

## Current Principal Place of Business:

10305 N.W. 41 STREET  
NO. 206  
MIAMI, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

10305 N.W. 41 STREET  
NO. 206  
MIAMI, FL 33178

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

RICARDO A. GONZALEZ & ASSOCIATES, P.A.  
7270 N.W. 12 STREET  
PH9  
MIAMI, FL 33126 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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

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

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

## ADDITIONS/CHANGES:

Title: MNGR ( ) Change (X) Addition  
Name: VINAY, MARCEL  
Address: 10305 NW 41 STREET, #206  
City-St-Zip: MIAMI, FL 33178 US

Title: MNGR ( ) Change (X) Addition  
Name: HERNANDEZ, WILFREDO  
Address: 10305 NW 41 STREET, #206  
City-St-Zip: MIAMI, FL 33178 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILFREDO HERNANDEZ

MNGR

07/06/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date