2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# L07000112446

Entity Name: DRUG TESTS "R" US, LLC

Current Principal Place of Business:

5650 MARION AVENUE
ORLANDO, FL 32839 US

New Principal Place of Business:

2791 L B MCLEOD RD APT A
ORLANDO, FL 32805 US

Current Mailing Address:

5650 MARION AVENUE
ORLANDO, FL 32839 US

New Mailing Address:

2791 L B MCLEOD RD APT A
ORLANDO, FL 32805 US

FEI Number: 26-1371258 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

BING, TRACEY
5650 MARION AVENUE
ORLANDO, FL 32839 US

Name and Address of New Registered Agent:

BING, TRACEY
2791 L B MCLEOD RD APT A
ORLANDO, FL 32805 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: TRACEY BING 05/01/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BING, TRACEY
Address: 5650 MARION AVENUE
City-St-Zip: ORLANDO, FL 32839 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BING, TRACEY
Address: 2791 L B MCLEOD RD APT A
City-St-Zip: ORLANDO, FL 32805 US

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 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: TRACEY BING P 05/01/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date