

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L52479

FILED
Feb 05, 2008
Secretary of State

Entity Name: PARADIGM LABORATORIES, INC.

Current Principal Place of Business:

668 INVERNESS COURT
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

926 CLUB HOSE BLVD.
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

668 INVERNESS COURT
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

926 CLUB HOSE BLVD.
NEW SMYRNA BEACH, FL 32168

FEI Number: 65-0179342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, JUDI
668 INVERNESS COURT
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

WHITE, JUDI
926 CLUB HOUSE BLVD.
NEW SMYRNA BEACH, FL 32168 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:

02/05/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WHITE, ROBERT O
Address: 668 INVERNESS COURT
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VSTD () Delete
Name: WHITE, JUDITH A
Address: 668 INVERNESS COURT
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WHITE, ROBERT O
Address: 926 CLUB HOUSE BLVD.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VSTD (X) Change () Addition
Name: WHITE, JUDITH A
Address: 926 CLUB HOUSE BLVD.
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: ROBERT O. WHITE

PD

02/05/2008

Electronic Signature of Signing Officer or Director

Date