## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000067478

Entity Name: COBRA DRUG SCREENING SERVICES, INC.

FILED Jan 03, 2002 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
883 SW 10TH ST. POMPANO BCH, FL 33060			SUITE 8	1937 E. ATLANTIC BLVD. SUITE 8 POMPANO BCH, FL 33060	
			New Maili	New Mailing Address:	
883 SW 10TH ST. POMPANO BCH, FL 33060			SUITE 8	1937 E. ATLANTIC BLVD. SUITE 8 POMPANO BCH, FL 33060	
FEI Number:	65-1128800	FEI Number Applied For ( ) FEI N	Number Not Appl	licable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
STARR, STUART 315 NE 3RD AVE., SUITE 200 FT. LAUDERDALE, FL 33301 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	
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).  Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title:		) Delete	Title:	P (X) Change ( ) Addition	
Name: Address: City-St-Zip:	WILLIAMS, J	OHN	Name: Address: City-St-Zip:	WILLIAMS, JOHN 1610 NE 32ND CT. POMPANO BCH, FL 33064	
Title: Name: Address: City-St-Zip:	WILLIAMS, S 1610 NE 32N		Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition WILLIAMS, SHIRLEY 1610 NE 32ND CT. POMPANO BCH, FL 33064	
Title: Name: Address: City-St-Zip:	COLEMAN, W 883 SW 10TH		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( WHEATON, L 8250 NW 9TH PLANTATION	FCT.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( BEHR, JOE 5724 TYLER HOLLYWOOI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LUCCEHSI, T 5601 N. DIXIE		Title: Name: Address: City-St-Zip:	ST (X) Change ( ) Addition LUCCEHSI, THERESE 5601 N. DIXIE HWY. FT. LAUDERDALE, FL 33308	

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 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: JOHN WILLIAMS P 01/03/2002