

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008778

FILED  
Apr 01, 2004  
Secretary of State

Entity Name: CHEM-SOFT LAB PRODUCTS, INC.

## Current Principal Place of Business:

589 EDGEWOOD AVENUE SOUTH  
JACKSONVILLE, FL 32205 US

## New Principal Place of Business:

5775 HYDE PARK CIRCLE  
JACKSONVILLE, FL 32210 US

## Current Mailing Address:

589 EDGEWOOD AVENUE SOUTH  
JACKSONVILLE, FL 32205 US

## New Mailing Address:

5775 HYDE PARK CIRCLE  
JACKSONVILLE, FL 32210 US

FEI Number: 71-0927031

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHAVERS, RONALD T  
585 METEOR STREET  
JACKSONVILLE, FL 32205 US

## Name and Address of New Registered Agent:

SHAVERS, RONALD T  
5775 HYDE PARK CIRCLE  
JACKSONVILLE, FL 32210 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: RONALD T. SHAVERS

04/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: WILLIAMS-SHAVERS, DIANE H  
Address: 585 METEOR STREET  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: P ( ) Delete  
Name: SHAVERS, RONALD T  
Address: 585 METEOR STREET  
City-St-Zip: JACKSONVILLE, FL 32205 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: WILLIAMS-SHAVERS, DIANE H  
Address: 5775 HYDE PARK CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: P (X) Change ( ) Addition  
Name: SHAVERS, RONALD T  
Address: 5775 HYDE PARK CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32210 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 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: RONALD T. SHAVERS

PRES

04/01/2004

Electronic Signature of Signing Officer or Director

Date