## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000024831

Entity Name: MEDLAB, INC.

FILED Feb 10, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6000 N. OCEAN BLVD. 1 HARBOR DRIVE NORTH OCEAN RIDGE, FL 33435 OCEAN RIDGE, FL 33435

Current Mailing Address: New Mailing Address:

6000 N. OCEAN BLVD. 1 HARBOR DRIVE NORTH OCEAN RIDGE, FL 33435 0CEAN RIDGE, FL 33435

FEI Number: 01-0771827 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAGHER, SAMI
6000 N. OCEAN BLVD.
0CEAN RIDGE, FL 33435

DAGHER, SALAM
1 HARBOR DRIVE NORTH
0CEAN RIDGE, FL 33435

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: SALAM DAGHER 02/10/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 DAGHER, SAMI
 Name:
 DAGHER, SALAM

 Address:
 6000 N. OCEAN BLVD.
 Address:
 I HARBOR DRIVE NORTH

 City-St-Zip:
 OCEAN RIDGE, FL 33435
 City-St-Zip:
 OCEAN RIDGE, FL 33435

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: SALAM DAGHER D 02/10/2004