## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 16, 2008 8:00 am Secretary of State DOCUMENT # P03000109969 04-16-2008 90041 022 \*\*\*150.00 1. Entity Name ESBÁ LABORATORIES INC. 60025105 Principal Place of Business Mailing Address 1001 JUPITER PARK DRIVE 1001 JUPITER PARK DRIVE SUITE 112 SUITE 112 JUPITER, FL 33458 US JUPITER, FL 33458 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04112008 Chg-P CR2E034 (12/06) City & State City & State 4. FFI Number Applied For 77-0491669 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent --BASSO BASSO, JORGE E Street Address (P.O. Box Number is Not Acceptable) 1001 JUPITER PARK DRIVE **SUITE 112** JUPITER, FL 33458 JUPITER 33458 8. 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. I am familiar with, and accept the obligations of registered agent. 4/11/08 ment and title if applicable (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed na 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition BASSO, ESTELA NAME NAME STREET ADDRESS 1001 JUPITER PARK DRIVE, SUITE 112 STREET ADDRESS JUPITER, FL 33458 CITY-ST-ZIP CITY-ST-7IP VΡ TITLE ☐ Delete ☐ Change ■ Addition NAME BASSO, JORGE E NAME 1001 JUPITER PARK DRIVE, SUITE 112 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST<sub>2</sub> ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

ESTELA

BASSO

FILED