

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000155157

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: WTC BACKGROUNDS & DRUG TESTING, INC.

**Current Principal Place of Business:**

2260 PALM BEACH LAKES BLVD  
SUITE 216  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

**Current Mailing Address:**

2260 PALM BEACH LAKES BLVD  
SUITE 216  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

FEI Number: 20-0494211      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HAAGENSON, BRYAN J  
515 EAST LAS OLAS BOULEVARD  
STE 860  
FORT LAUDERDALE, FL 33301 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KING, LISA C  
Address: 3040 MARBELLA COURT  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: CEO ( ) Delete  
Name: KING, RALPH E  
Address: 3040 MARBELLA COURT  
City-St-Zip: WEST PALM BEACH, FL 33049 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: KING, LISA C  
Address: 2260 PALM BEACH LAKES BLVD STE 216  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: CEO (X) Change ( ) Addition  
Name: KING, RALPH E  
Address: 2260 PALM BEACH LAKES BLVD STE 216  
City-St-Zip: WEST PALM BEACH, FL 33049 US

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: LISA C. KING

P

04/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date