## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000037407

City-St-Zip:

FILED Oct 05, 2006 Secretary of State

Entity Name: PHARMALAB ENTERPRISES, INC. **Current Principal Place of Business: New Principal Place of Business:** 3795 WEST 18 AVENUE HIALEAH, FL 33012 **Current Mailing Address: New Mailing Address:** 3795 WEST 18 AVENUE HIALEAH, FL 33012 FEI Number: 51-0498970 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEREZ, ALBERTO J 3795 WEST 18 AVENUE HIALEAH, FL 33012 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: ALBERTO J. PEREZ Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition PEREZ, ALBERTO J Name: Name: 15814 SW 102ND STREET Address: Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: Title: SVD Title: SVD (X) Change ( ) Addition () Delete Name: MORIYON, MARIA ELENA Name: MORIYON, MARIA ELENA 12780 SW. 26ST STREET 12780 SW. 26TH STREET Address: Address: MIAMI, FL 33196 City-St-Zip: City-St-Zip: MIAMI, FL 33196 Title: ( ) Change (X) Addition Title: () Delete SEC Name: PEREZ, RAMONA Name: 5570 SW 2ND STREET Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

MIAMI, FL 33134

SIGNATURE: ALBERTO J. PEREZ PTD 10/05/2006