

PO6000049979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

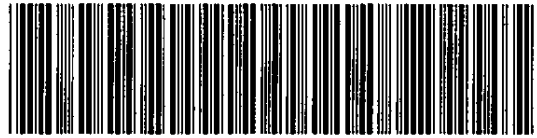
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2009 AUG 20 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TB AUG 24 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Informicro Corporation
Name of Corporation

DOCUMENT NUMBER: P06000049979

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tony Hua
Name of Contact Person

Informicro Corporation
Firm/Company

2075 N Capitol Ave
Address

San Jose, CA 95132
City/State and Zip Code

viviany@malabs.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vivian Yu at (408) 941-8234
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2009

TONY HUA
INFOMICRO CORPORATION
2075 N CAPITOL AVE
SAN JOSE, CA 95132

SUBJECT: INFOMICRO CORPORATION
Ref. Number: P06000049979

We have received your document for INFOMICRO CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to file your document, the subject entity must first be reinstated.

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2007 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application or annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee per year.

Therefore, the total amount due to reinstate the corporation is \$1050.00. Add an additional \$8.75 for each certificate of status requested.

The changes reflected in your document can be made on the reinstatement application. You can deduct the fee previously submitted from the reinstatement fee due.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 309A00025420

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Informicro Corporation
2. The principal office address: 8501 NW 17TH STREET-STE 128; MIAMI, FL 33126
Attn: Tony Hua
3. The mailing address (if different): 2075 N Capitol Ave; SAN JOSE, CA 95132
4. Date of incorporation/qualification: 04/06/2006 Document number: P06000049979
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T Corporation System

1200 South Pine Island Road

Plantation, Florida, 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Ma Laboratories Inc.

8501 NW 17TH STREET-STE 128;

P.O. Box NOT acceptable

MIAMI, FL 33126

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Tony Hua VP OF FINANCE
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

07/17/09
Date

If signing on behalf of an entity:

TONY HUA
Typed or Printed Name

*** FILING FEE \$35.00 ***

*we paid on check # 414003
cashd on
7/22/09*