

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000147224

Entity Name: OPTIMAL LAB, INC.

FILED  
Feb 16, 2007  
Secretary of State

## Current Principal Place of Business:

275 FOUNTAINBLEAU BLVD SUITE 165  
MIAMI, FL 33172

## New Principal Place of Business:

## Current Mailing Address:

275 FOUNTAINBLEAU BLVD SUITE 165  
MIAMI, FL 33172

## New Mailing Address:

PO BOX 441181  
MIAMI, FL 33144

FEI Number: 20-5897799

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MEDEROS, NELYDA  
19701 SW 197TH AVE  
MIAMI, FL 33187 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: RODRIGUEZ, MARILUZ  
Address: 15461 SW 81 CIRCLE LANE #68  
City-St-Zip: MIAMI, FL 33193

Title: V ( ) Delete  
Name: PERDOMO, LILIANA  
Address: 13820 SW 175 TERR  
City-St-Zip: MIAMI, FL 33177

Title: T (X) Delete  
Name: MEDEROS, NELYDA  
Address: 19701 SW 197TH AVE  
City-St-Zip: MIAMI, FL 33187

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PERDOMO, LILIANA  
Address: 13820 SW 175 TERR  
City-St-Zip: MIAMI, FL 33177

Title: VP (X) Change ( ) Addition  
Name: MEDEROS, NEYDA  
Address: 19701 SW 197 AVE  
City-St-Zip: MIAMI, FL 33187

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: NEYDA MEDEROS

PD

02/16/2007

Electronic Signature of Signing Officer or Director

Date