2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P07000030109

Entity Name: ELAB'S SUPPLY, INC.

Current Principal Place of Business:

10411 N.W. 28TH STREET BLDG. C STE 104
DORAL, FL 33172

New Principal Place of Business:

3705 NW 115TH AVE BAY 8
1ST FLOOR
DORAL, FL 33178

Current Mailing Address:

10411 N.W. 28TH STREET BLDG. C STE 104
DORAL, FL 33172

New Mailing Address:

3705 NW 115TH AVE BAY 8
1ST FLOOR
DORAL, FL 33178

FEI Number: 20-8611433 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CIAMBARELLA, LUIGI
10411 N.W. 28TH STREET BLDG. C STE 104
DORAL, FL 33172 US

Name and Address of New Registered Agent:

CIAMBARELLA, LUIGI
3705 NW 115TH AVE BAY 8
DORAL, FL 33178 US

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: _____ 04/29/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: CIAMBARELLA, LUIGI
Address: 10411 N.W. 28TH STREET BLDG. C STE 104
City-St-Zip: DORAL, FL 33172

Title: VPT ( ) Delete
Name: NUNES DE LIMA, RAIMUNDO E
Address: 10411 N.W. 28TH STREET BLDG. C STE 104
City-St-Zip: DORAL, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: CIAMBARELLA, LUIGI
Address: 3705 NW 115TH AVE BAY 8
City-St-Zip: DORAL, FL 33178

Title: VPT (X) Change ( ) Addition
Name: NUNES DE LIMA, RAIMUNDO E
Address: 3705 NW 115TH AVE BAY 8
City-St-Zip: DORAL, FL 33178

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: LUIGI CIAMBARELLA PS 04/29/2009
Electronic Signature of Signing Officer or Director — Date