

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000077715

Entity Name: LABTECH INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

3144 NORTHSIDE DRIVE
SUITE 201
KEY WEST, FL 33040 US

New Principal Place of Business:

22290 OVERSEAS HIGHWAY
CUDJOE KEY, FL 33042 US

Current Mailing Address:

3144 NORTHSIDE DRIVE
SUITE 201
KEY WEST, FL 33040 US

New Mailing Address:

12 TRAIL RIDGE ROAD
ASHEVILLE, NC 28804 US

FEI Number: 37-1573554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FEY, WAYNE D
20722 2ND AVE WEST
CUDJOE KEY, FL 33042 US

Name and Address of New Registered Agent:

FEY, WAYNE D
22290 OVERSEAS HIGHWAY
CUDJOE KEY, FL 33042 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: WAYNE D FEY

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: FEY, WAYNE D
Address: 3144 NORTHSIDE DRIVE SUITE 201
City-St-Zip: KEY WEST, FL 33040 US

Title: V () Delete
Name: SEMMES, PAUL
Address: 3144 NORTHSIDE DRIVE SUITE 201
City-St-Zip: KEY WEST, FL 33040 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: FEY, WAYNE D
Address: 12 TRAIL RIDGE ROAD
City-St-Zip: ASHEVILLE, NC 28804 US

Title: V (X) Change () Addition
Name: SEMMES, PAUL
Address: 22290 OVERSEAS HIGHWAY
City-St-Zip: CUDJOE KEY, FL 33042 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: WAYNE D FEY

PSTD

04/20/2009

Electronic Signature of Signing Officer or Director

Date