2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000101818

FILED Jan 06, 2011 Secretary of State

Entity Name: CONSUMER TESTING LABORATORIES (INDIA) LIMITED, INC.

Current Principal Place of Business: New Principal Place of Business:

477 SOUTH ROSEMARY AVENUE 222 LAKEVIEW AVE

SUITE 316 SUITE 610

WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

477 SOUTH ROSEMARY AVENUE 222 LAKEVIEW AVE

SUITE 316 SUITE 610

WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 33401 US

FEI Number: 02-0686879 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PRESTON, ROBERT L
477 SOUTH ROSEMARY AVENUE
SUITE 316

PRESTON, ROBERT L
222 LAKEVIEW AVE
SUITE 610

WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 33401 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: 01/06/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P. D

Name: BUZIK, YEFIM

Address: 222 LAKEVIEW AVE, SUITE 610
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: S, D

Name: SATTER, STEWART A

Address: 222 LAKEVIEW AVE, SUITE 610
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: CFO

Name: PRESTON, ROBERT

Address: 222 LAKEVIEW AVE, SUITE 610 City-St-Zip: WEST PALM BEACH, FL 33401

I hereby 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 all other like empowered.

SIGNATURE: ROBERT PRESTON CFO 01/06/2011