

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P11000101112

**FILED**  
**Dec 11, 2012**  
**Secretary of State**

**Entity Name:** ILAB TECHNICAL FACILITIES SOLUTIONS INCORPORATED

**Current Principal Place of Business:**

2385 NW EXECUTIVE CENTER DRIVE  
SUITE 100  
BOCA RATON, FL 33431 US

**New Principal Place of Business:**

**Current Mailing Address:**

2385 NW EXECUTIVE CENTER DRIVE  
SUITE 100  
BOCA RATON, FL 33431 US

**New Mailing Address:**

**FEI Number:** 45-4363679

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** CORPORATION SERVICE COMPANY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DTR  
**Name:** NUGENT, SEAN T  
**Address:** 2385 NW EXECUTIVE CENTER DRIVE SUITE 100  
**City-St-Zip:** BOCA RATON, FL 33431 US

**Title:** DTR  
**Name:** ROSENSTEIN, STEVEN  
**Address:** 2385 NW EXECUTIVE CENTER DRIVE SUITE 100  
**City-St-Zip:** BOCA RATON, FL 33431 US

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:** SEAN NUGENT

DR

12/11/2012

Electronic Signature of Signing Officer or Director

Date