## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P92000014713

Entity Name: ICON LABORATORIES, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
636 WES	TOWN PARKWAY			
STE 203	0.100.00			
VEST DES	S MOINES, IA 50266	US		
Current Mailing Address:			New Mailing Address:	
636 WES	TOWN PARKWAY			
STE 203				
VEST DES	S MOINES, IA 50266	US		
El Number:	59-3157357 FEI N	lumber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	Address of Current	: Registered Agent:	Name and Address of	of New Registered Agent:
MELBOUR	ÄWBRIDGE AVE RNE, FL 32901 US		ournose of changing its registere	d office or registered agent, or both,
	of Florida.	, tino otaternent for the p	purpose of onlinging its registere	a office of regionered agent, or both,
SIGNATUR	RE:			
	Electronic Sign	ature of Registered Age	ent	Date
lection Can	npaign Financing Trust F	o o		
SELCED	AND DIDECTORS		ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR
FFICERS	S AND DIRECTORS:		ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR
tle:	S ( ) Delete		Title:	( ) Change ( ) Addition
ame:	GRAU, ALAN		Name:	
ddress:	1344 TRUMAN PLACES	j	Address:	
ity-St-Zip:	AMES, IA 50010		City-St-Zip:	
tle:	V () Delete		Title:	( ) Change ( ) Addition
ame:	GRAU, ALAN		Name:	, , ,
dress:	1344 TRUMAN PLACE		Address:	
ty-St-Zip:	AMES, IA 50010		City-St-Zip:	
tle:	P () Delete		Title:	( ) Change ( ) Addition
ame:	GRAU, ALAN		Name:	( ) Shange ( ) Addition
ddress:	1344 TRUMAN PLACE		Address:	
ity-St-Zip:	AMES, IA 50010		City-St-Zip:	
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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: ALAN GRAU PRES 03/24/2009