## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000019976

Entity Name: TRIANGLE TESTING LAB, INC.

FILED Aug 20, 2007 Secretary of State

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

13415 SOUTHERN BLVD LOXAHACHEE, FL 33470

Current Mailing Address: New Mailing Address:

6483 ROYAL PALM BEACH BLVD 12496 SHORELINE DR WEST PALM BEACH, FL 33412 WELLINGTON, FL 33414

FEI Number: 65-0407304 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:

WHITEHEAD, ROBERT D
6483 ROYAL PALM BEACH BLVD
WEST PALM BEACH, FL 33412 US
WHITEHEAD, ROBERT D
12496 SHORELINE DR
WELLINGTON, FL 33414 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: ROBERT D. WHITEHEAD 08/20/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: WHITEHEAD, ROBERT D Name: WHITEHEAD, ROBERT D

Name: WHITEHEAD, ROBERT D

Address: 6483 ROYAL PALM BEACH BLVD.

City-St-Zip: WEST PALM BEACH, FL 33412

Name: WHITEHEAD, ROBERT D

Address: 12496 SHORELINE LINE

City-St-Zip: WELLINGTON, FL 33414

Name: GALLEY, CHRIS Name: GAILEY, CHRIS

Address: 6559 ROYAL PALM BEACH BLVD
City-St-Zip: WEST PALM BEACH, FL 33412
Address: 6559 ROYAL PALM BEACH BLVD
City-St-Zip: WEST PALM BEACH, FL 33412
WEST PALM BEACH, FL 33412

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BOYETTE, RÌCK
 Name:

 Address:
 4031 COCONUT BLVD
 Address:

 City-St-Zip:
 ROYAL PALM BEACH, FL 33411
 City-St-Zip:

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: ROBERT D. WHITEHEAD DIR 08/20/2007