

FILED P93000039013

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

FILED  
Jun 20, 2002 8:00 A.M.  
Secretary of State

DOCUMENT # P93000039013 ✓  
1. Entity Name  
INTERNATIONAL LABORATORY TECHNOLOGY CORP.

DO NOT WRITE IN THIS SPACE

91347

2. Principal Place of Business <u>2701 SOUTH BAYSHORE DRIVE</u>		3. Mailing Address <u>SAME</u>	
Suite, Apt. #, etc. <u>SUITE 610</u>		Suite, Apt. #, etc.	
City & State <u>MIAMI FL</u>		City & State	
Zip <u>33133-5360</u>	Country <u>MIAMI-DADE</u>	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number <u>05-0413741</u>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

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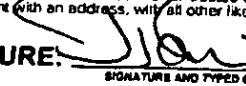
7. Name and Address of Current Registered Agent	
Name: <u>JEFFREY B. RABIN</u>	
Street Address (P.O. Box Number is Not Acceptable) <u>2701 SOUTH BAYSHORE DRIVE</u>	
<u>SUITE 610</u>	
City <u>MIAMI</u>	FL Zip Code <u>33133-5360</u>

8. 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 JEFFREY B. RABIN  6/3/02  
Signature, typed or printed name of registered agent and date of signature. (NOTE: Registered Agent signature required when changing) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>P/D</u> <u>JEFFREY B. RABIN</u> <u>2701 SOUTH BAYSHORE DRIVE - 610</u> <u>MIAMI, FL 33133-5360</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>V/P/D</u> <u>PAUL MARCHANT</u> <u>2701 SOUTH BAYSHORE DRIVE - 610</u> <u>MIAMI, FL 33133-5360</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>V/P/D</u> <u>VICTOR J. STAATS</u> <u>2701 SOUTH BAYSHORE DRIVE - 610</u> <u>MIAMI, FL 33133-5360</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address, with all other like empowered.  
SIGNATURE:  JEFFREY B. RABIN 6/3/02 (305) 859-9119  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Secretary/Printer

CR2E034B (12/01)