2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000036215

Entity Name: CLINICAL RESEARCH SERVICES, INC.

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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8838 INDIAN RIVER RUN 8838 INDIAN RIVER RUN BOYNTON BEACH, FL 33437 BOYNTON BEACH, FL 33472

Current Mailing Address: New Mailing Address:

8838 INDIAN RIVER RUN 8838 INDIAN RIVER RUN BOYNTON BEACH, FL 33437 US BOYNTON BEACH, FL 33472 US

FEI Number: 65-0489835 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GARG, DYAL C GARG, DYAL C 8838 INDIAN RIVER RUN 8838 INDIAN RIVER RUN US BOYNTON BEACH, FL 33437 US BOYNTON BEACH, FL 33472

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: 01/08/2008

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

GARG, DYAL C GARG, DYAL C Name: Name: 8838 INDIAN RIVER RUN 8838 INDIAN RIVER RUN Address: Address: City-St-Zip: BOYNTON BEACH, FL 33437 City-St-Zip: BOYNTON BEACH, FL 33472

Title: (X) Change () Addition Title: () Delete

GARG, USHA R GARG, USHA R Name: Name: 8838 INDIAN RIVER RUN 8838 INDIAN RIVER RUN Address: Address: BOYNTON BEACH, FL 33437 US BOYNTON BEACH, FL 33472 US

Title: Title: D () Delete D (X) Change () Addition

GARG, AMEE GARG, AMEE Name: Name: 8838 INDIAN RIVER RUN 8838 INDIAN RIVER RUN Address: Address:

City-St-Zip: BOYNTON BEACH, FL 33437 US City-St-Zip: BOYNTON BEACH, FL 33472 US

Title: () Delete Title: (X) Change () Addition GARG, SHELLY GARG, SHELLY Name: Name:

Address: 8838 INDIAN RIVER RUN Address: 8838 INDIAN RIVER RUN City-St-Zip: BOYNTON BEACH, FL 33437 US City-St-Zip: BOYNTON BEACH, FL 33472 US

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: DYAL C GARG Ρ 01/08/2008