2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005
Secretary of State

DOCUMENT# P95000028309

Entity Name: SYNQUEST LABORATORIES, INC.

Current Principal Place of Business:

13201 RACHAEL BLVD
ROUTE 2054
ALACHUA, FL 32615 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 309
ALACHUA, FL 326160309 US

New Mailing Address:

FEI Number: 59-3323091 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DU BOISSON, RICHARD A
1914 NW 89TH DRIVE
GAINESVILLE, FL 32606 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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	DU BOISSON, RICHARD A	
Address:	1914 NW 89TH DRIVE	
City-St-Zip:	GAINESVILLE, FL 32606	
Title:	V	( ) Delete
Name:	ALTY, ADAM C	
Address:	1911 NW 32ND TERR	
City-St-Zip:	GAINESVILLE, FL 32605	
Title:	VP	( ) Delete
Name:	KUME, TAKASHI	
Address:	4830 NW 43RD STREET APT G100	
City-St-Zip:	GAINESVILLE, FL 32606	
Title:	D	( ) Delete
Name:	HAYASE, TOSHIKI	
Address:	50 MAIN STREET 8 TH FLOOR	
City-St-Zip:	WHITE PLAINS, NY 10606	
Title:	D	( ) Delete
Name:	ISHIDA, MICHIO	
Address:	50 MAIN STREET 8 TH FLOOR	
City-St-Zip:	WHITE PLAINS, NY 10606	
Title:	D,T	( ) Delete
Name:	KANEKO, KEIJI	
Address:	50 MAIN STREET 8 TH FLOOR	
City-St-Zip:	WHITE PLAINS, NY 10606	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	TAKADA, NAOTO	
Address:	4830 NW 43RD STREET APT G172	
City-St-Zip:	GAINESVILLE, FL 32606	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	YAMADA, SHINICHI	
Address:	50 MAIN STREET 8 TH FLOOR	
City-St-Zip:	WHITE PLAINS, NY 10606	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD DU BOISSON P 02/15/2005

Electronic Signature of Signing Officer or Director Date