## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000028309

Title:

Title: Name:

Address:

City-St-Zip:

Name: Address:

City-St-Zip:

HAJIME, NAKAI

13201 RACHEL BLVD

ALACHUA, FL 32615

MASAMICHI, MARUTA

13201 RACHEL BLVD

ALACHUA, FL 32615

Entity Name: SYNQUEST LABORATORIES, INC.

FILED Mar 15, 2011 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 13201 RACHAEL BLVD **ROUTE 2054** ALACHUA, FL 32615 **Current Mailing Address: New Mailing Address:** P.O. BOX 309 ALACHUA, FL 326160309 US FEI Number: 59-3323091 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: ALTY, ADAM C 1911 NW 32ND TERRACE GAINESVILLE, FL 32605 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** Title: OGURA, MOTOYOSHI Name: 13201 RACHEL BLVD Address: City-St-Zip: ALACHUA, FL 32615 Title: P/S Name: ALTY, ADAM C 1911 NW 32ND TERR Address: GAINESVILLE, FL 32605 City-St-Zip: Title: VP/D MISAKA, YOICHI Name: 13201 RACHEL BLVD Address: City-St-Zip: ALACHUA, FL 32615

I hereby 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 all other like empowered.

SIGNATURE: ADAM ALTY P 03/15/2011