2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

MIAMI FL 33145

2828 CORAL WAY #410

P95000089161 DOCUMENT

1. Entity Name

INLAB SCIENTIFIC, INC.

Principal Place of Business

2828 CORAL WAY #410 MIAMI FL 33145



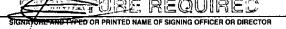
FILED May 05, 2003 8:00 am Secretary of State

05-05-2003 90359 010 ***150.00

2. Principal Place of Business		3. Mailing Addr	3. Mailing Address			T TO BE LIKE THE THEFT BEST BOST OF THE FAST OF DESIGN CONTROL TO THE STREET STREET STREET STREET STREET STREET				
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State	City & State		4. FEIN	4. FEI Number 65-0629060			oplied For ot Applicable	
Zip	Country	Zip	Coun	Country		ficate of Status Desired	tus Desired			
			7. Nam	e and Address of New F	Registered A	gent				
ALVAREZ, FAU 2828 CORAL V MIAMI FL 3314		Name Street Address (P.O. Box Number is Not Acceptable)								
MIAMI FE 33143				City FL Zip Code						
the obligations	of registered agent.	tement for the purpose of ch	anging its register	ed office or regis	stered agent,	or both, in the State of Flo		miliar with;	and accept	
Signa	ture, typed or printed name of regis	stered agent and title if applicable.	(NOTE: Registere	d Agent signature requ	uired when reinstat	ing)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						9. Election Campaign Fit Trust Fund Contribution	on. 🗆 🗆	Adde	00 May Be d to Fees	
10.	OFFICE	ERS AND DIRECTORS	11.		ADDITI	ONS/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	
-STREET ADDRESS 282	FERIAN, PEDRO A DR 8 CORAL WAY #410 MI FL 33145		NAM STRE	1				Change	☐ Addition	
NAME STREET ADDRESS CHY-ST-ZIP			NAM STRE					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAM STRE					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		c	NAM STRE					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAM STRE					☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	that the information	pplied with this filling does not	NAM Stre City	EET ADDRESS - ST- ZIP	Section 110	07/(3VI) Florida Statutos		Change	Addition	

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



Daytime Phone #