

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000097035

FILED  
Apr 09, 2004  
Secretary of State

Entity Name: SOUTH ATLANTIC TESTING SERVICES, INC.

**Current Principal Place of Business:**

3300 UNIVERSITY DRIVE  
STE 903  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

3300 UNIVERSITY DRIVE  
STE 903  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

FEI Number: 65-0636245      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CARLSON, GRAFTON N P.A.  
1290 EAST OAKLAND PARK BLVD  
STE 200  
FORT LAUDERDALE, FL 333344443 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: CEO ( ) Delete  
Name: SILVER, ROCHELLE  
Address: 3300 UNIVERSITY DR #903  
City-St-Zip: POMPANO BEACH, FL 33065

Title: CFO ( ) Delete  
Name: SILVER, ROBERT  
Address: 3300 UNIVERSITY DR #903  
City-St-Zip: POMPANO BEACH, FL 33065

Title: COO ( ) Delete  
Name: SILVER, RYAN  
Address: 3300 UNIVERSITY DRIVE #903  
City-St-Zip: POMPANO BEACH, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT SILVER

CFO

04/09/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date