2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

Aug 14, 2003 8:00 am Secretary of State DOCUMENT # P96000100039 08-14-2003 90068 027 ***150.00 1. Entity Name RAPID DRUG TESTING SERVICES,-INC. Principal Place of Business Mailing Address 97300 OVERSEAS HWY 97300 OVERSEAS HWY KEY LARG FL 33037 KEY LARGO FL 33037 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0713106 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name O'CONNELL, PETER J Street Address (P.O. Box Number is Not Acceptable) 973000 OVERSEAS HWY #2 KEY LARGO FL 33037 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE; Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 **\$5.00** May Be 9. Election Campaign Financing After September 10, 2003 Fee will be \$750.00 _Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. **PSD** ☐ Delete Change ☐ Addition TITLE TITLE BLATE, BONNIE J NAME NAME 97300 OVERSEAS HWY #2 STREET ADDRESS STREET ADDRESS KEY LARGO FL 33037 CITY-ST-ZIP CITY-ST-ZIP TITLE VTD ☐ Delete TITI F Change ☐ Addition O'CONNELL, PETER J NAME NAME 97300 OVERSEAS HWY #2 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP KEY LARGO FL 33037 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME

12. I hereby certify that the information supplied with this filing does not qualify 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 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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

RAPID DRUG TESTING SERVICES, INC.

DRUG AND ALCOHOL SCREENING PRODUCTS

ON SITE TEST KITS * SAVE TIME * SAVE \$\$\$\$

August 12, 2003

Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Sent UPS Overnight

RE Document # P9600010039
Rapid Drug Testing Services, Inc.

Dear Sir:

Enclosed you will find Check # 7317 dated 8/12/2003 in the amount of \$150.00. This amount represents payment for my Annual Report.

In prior years, I have received the Annual Report and pay the amount due in January. I did not receive any Annual Report for this past year. Accordingly, please waive the \$400 fee.

If you have any questions, please contact me at (305) 852-3007.

Thank you.

Very truly yours,

RAPID DRUG TESTING SERVICES, INC.

Bonnie J. Blate

President

BJB/sb