

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000070210

FILED
Oct 22, 2009
Secretary of State

Entity Name: FLORIDA REFERENCE LABORATORY, INC.

Current Principal Place of Business:

1801 CORAL WAY
4TH FL
MIAMI, FL 33145

New Principal Place of Business:

7109 SW 43 ST
MIAMI, FL 33155

Current Mailing Address:

1801 CORAL WAY
4TH FL
MIAMI, FL 33145

New Mailing Address:

7109 SW 43 ST
MIAMI, FL 33155

FEI Number: 65-0783984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SARDINA, JENNIFER P.A.
255 UNIVERSITY DRIVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SARDINA, JENNIFER P.A.
2645 SW 37 AVE.
SUITE # 504
MIAMI, FL 33133 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: JENNIFER SARDINA

10/22/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: VICENTE, ARMANDO F
Address: 1801 CORAL WAY, 4TH FLOOR
City-St-Zip: MIAMI, FL 33145

Title: PD () Delete
Name: VICENTE, ARMANDO R
Address: 1801 CORAL WAY, 4TH FLOOR
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: VICENTE, ARMANDO F
Address: 7109 SW 43 ST
City-St-Zip: MIAMI, FL 33155

Title: PD (X) Change () Addition
Name: VICENTE, ARMANDO R
Address: 7109 SW 43 ST
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ARMANDO R VICENTE

PRES

10/22/2009

Electronic Signature of Signing Officer or Director

Date