

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000094547

Entity Name: SUN LABS USA, INC.

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

2955 SE 3RD CT.
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

2955 SE 3RD CT.
OCALA, FL 34471

New Mailing Address:

FEI Number: 59-3551516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAGIDIPATI, DEVAIAH
2955 SE 3RD COURT
OCALA, FL 34471 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: D () Delete
Name: PAGIDIPATI, RUDDRAMA
Address: 1321 SW 42ND STREET
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: PAGIDIPATI, DEVAIAH
Address: 1321 SW 42ND STREET
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: PAGIDIPATI, SIDDHARTHA D
Address: 1321 SW 42ND STREET
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: PAGIDIPATI, SRUJANI D
Address: 1321 SW 42ND STREET
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: PAGIDIPATI, RAHULDEV
Address: 1321 SW 42ND STREET
City-St-Zip: OCALA, FL 34471

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:

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 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: DEVAIAH PAGIDIPATI MD

D

04/24/2007

Electronic Signature of Signing Officer or Director

Date