

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000096303

Entity Name: AXIOM LABORATORIES, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

4237 HENDERSON BLVD.  
TAMPA, FL 33629

## New Principal Place of Business:

4613 N. CLARK AVE.  
TAMPA, FL 33614

## Current Mailing Address:

PO BOX 1186  
TAMPA, FL 33601

## New Mailing Address:

FEI Number: 59-3605967

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BERGMANN, FREDERICK  
4237 HENDERSON BLVD.  
TAMPA, FL 33629 US

## Name and Address of New Registered Agent:

BERGMANN, FREDERICK  
4613 N. CLARK AVE.  
TAMPA, FL 33614 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:

05/01/2009

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: D ( ) Delete  
Name: BERGMANN, FREDERICK J  
Address: 4237 HENDERSON BLVD.  
City-St-Zip: TAMPA, FL 33629

Title: D ( ) Delete  
Name: MCCOSKRIE, JOHN H  
Address: 4237 HENDERSON BLVD.  
City-St-Zip: TAMPA, FL 33629

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BERGMANN, FREDERICK J  
Address: 4613 N. CLARK AVE.  
City-St-Zip: TAMPA, FL 33614

Title: D (X) Change ( ) Addition  
Name: MCCOSKRIE, JOHN H  
Address: 4613 N. CLARK AVE.  
City-St-Zip: TAMPA, FL 33614

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: FREDERICK J. BERGMANN

D

05/01/2009

Electronic Signature of Signing Officer or Director

Date