2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2004
Secretary of State

DOCUMENT# V56825

Entity Name: M3S LABORATORIES, INC.

Current Principal Place of Business:

956 UPSALA RD
SANFORD, FL 32771 US

New Principal Place of Business:

956 UPSALA ROAD
SANFORD, FL 32771 US

Current Mailing Address:

956 UPSALA RD
SANFORD, FL 32771 US

New Mailing Address:

2800 COUNTRY CLUB ROAD
SANFORD, FL 32771 US

FEI Number: 59-3134970 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOMASZEWSKI, STANLEY J.
304 OAK LEAF CIRCLE
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

TOMASZEWSKI, STANLEY J.
2800 COUNTRY CLUB ROAD
SANFORD, FL 32771 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: STANLEY J TOMASZEWSKI 08/09/2004
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: PD ( ) Delete
Name: TOMASZEWSKI, STANLEY J
Address: 304 OAK LEAF CIR
City-St-Zip: LAKE MARY, FL 32746

Title: VSTD ( ) Delete
Name: TOMASZEWSKI, STEPHANIE R
Address: 304 OAK LEAF CIR
City-St-Zip: LAKE MARY, FL 32746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TOMASZEWSKI, STANLEY J
Address: 2800 COUNTRY CLUB ROAD
City-St-Zip: SANFORD, FL 32771

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: STEPHANIE R. TOMASZEWSKI VSTD 08/09/2004
Electronic Signature of Signing Officer or Director Date