2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2017
Secretary of State
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Entity Name: ADVANCED MEDICAL LABORATORIES INC.

Current Principal Place of Business:

1690 U.S. HWY 1 SOUTH
SUITE D
ST. AUGUSTINE, FL 32084

Current Mailing Address:

1690 U.S. HWY 1 SOUTH
SUITE D
ST. AUGUSTINE, FL 32084 US

FEI Number: 45-5519091

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHLOSS, PAUL
208 LONDON DRIVE
PALM COAST, FL 32137 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P	Title	VP
Name	SCHLOSS, PAUL	Name	SCHLOSS, LOURDES
Address	208 LONDON DRIVE	Address	208 LONDON DRIVE
City-State-Zip:	PALM COAST FL 32137	City-State-Zip:	PALM COAST FL 32137
Title	CFO	Title	COO
Name	LEMCKE, DAVID	Name	FORRISTER, KAREN
Address	1690 U.S. HWY 1 SOUTH SUITE D	Address	1690 U.S. HWY 1 SOUTH SUITE D
City-State-Zip:	ST. AUGUSTINE FL 32084	City-State-Zip:	ST. AUGUSTINE FL 32084

I hereby 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 all other like empowered.

SIGNATURE: DAVID LEMCKE CFO 03/16/2017

Electronic Signature of Signing Officer/Director Detail — Date