

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842084

FILED
Jan 14, 2011
Secretary of State

Entity Name: LAB-VOLT SYSTEMS, INC.

Current Principal Place of Business:

1710 STATE HIGHWAY 34
ATTN: CHARLES H. BOND
FARMINGDALE, NJ 07727

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 686
ATTN: CHARLES H. BOND
FARMINGDALE, NJ 07727

New Mailing Address:

FEI Number: 21-0415841 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: D
Name: SAVINELLI, EMILIO A
Address: 24 MOLLBROOK DR
City-St-Zip: WILTON, CT 06897 US

Title: OD
Name: SCHLUTER, PETER M
Address: 4455 GULF PINES DRIVE
City-St-Zip: SANIBEL, FL 33957 US

Title: D
Name: GREENE, JAMES R
Address: 134 BUTTONWOOD DR.
City-St-Zip: FAIR HAVEN, NJ 07704 US

Title: OD
Name: BOND, CHARLES H
Address: 46-41 BLOOMINGDALE DRIVE
City-St-Zip: HILLSBOROUGH, NJ 08844

Title: D
Name: HUNTER, GARRETT B
Address: 150 TAMARACK DRIVE
City-St-Zip: E. GREENWICH, RI 02818 US

Title: D
Name: KETTEMAN, CHARLES H
Address: 2343 WULFERT ROAD
City-St-Zip: SANIBEL ISLAND, FL 33957 US

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: CHARLES H. BOND

MR.

01/14/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date