

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 16, 2009
Secretary of State**

DOCUMENT# F99000000437

Entity Name: LABTEST INTERNATIONAL, INC.

Current Principal Place of Business:

2107 SWIFT DRIVE
SUITE 200
OAK BROOK, IL 60523 US

New Principal Place of Business:

Current Mailing Address:

C/O CHRISTOPHER VERSTRATE
77 W. WACKER DRIVE, SUITE 4100
CHICAGO, IL 60601 US

New Mailing Address:

FEI Number: 16-1541809 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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: P () Delete
Name: GENE
Address: 2107 SWIFT DRIVE
City-St-Zip: OAK BROOK, IL 60523 US

Title: D () Delete
Name: TIMOTHY
Address: 70 CODMAN HILL ROAD BOXBOROUGH MA 01719
City-St-Zip: BOXBOROUGH, MA 01719 US

Title: D () Delete
Name: CHRISTINA
Address: 2/F GARMENT CENTRE, 576 CASTLE PEAK RD.
City-St-Zip: KOWLOON, NA HK

Title: D () Delete
Name: PAUL
Address: 2/F GARMENT CENTRE, 576 CASTLE PEAK RD.
City-St-Zip: KOWLOON, NA HK

Title: S () Delete
Name: THORN, MICHAEL
Address: 2107 SWIFT DRIVE
City-St-Zip: OAK BROOK, IL 60523 US

Title: A () Delete
Name: VERSTRATE, CHRISTOPHER
Address: 77 W. WACKER DRIVE
City-St-Zip: CHICAGO, IL 60601 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RIDER, GENE
Address: 2107 SWIFT DRIVE
City-St-Zip: OAK BROOK, IL 60523 US

Title: D (X) Change () Addition
Name: COUROSSI, TIMOTHY
Address: 70 CODMAN HILL ROAD BOXBOROUGH MA 01719
City-St-Zip: BOXBOROUGH, MA 01719 US

Title: D (X) Change () Addition
Name: LAW, CHRISTINA
Address: 2/F GARMENT CENTRE, 576 CASTLE PEAK RD.
City-St-Zip: KOWLOON, NA HK

Title: D (X) Change () Addition
Name: YAO, PAUL
Address: 2/F GARMENT CENTRE, 576 CASTLE PEAK RD.
City-St-Zip: KOWLOON, NA HK

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: CHRISTOPHER VERSTRATE, ATTORNEY

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07/16/2009

Electronic Signature of Signing Officer or Director

_____ Date