

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000000437

1. Entity Name
LABTEST INTERNATIONAL, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
00 OCT 30 PM 12:12

Principal Place of Business
40 COMMERCE WAY. UNIT B
TOTOWA NJ 07512

Mailing Address
40 COMMERCE WAY. UNIT B
TOTOWA NJ 07512

2. Principal Place of Business
70 Diamond Road
Suite, Apt. #, etc.

3. Mailing Address
3933 US Route 11
Suite, Apt. #, etc.

City & State
Springfield, NJ

City & State
Cortland, NY

Zip
07081

Country
USA

Zip
13045

Country
USA



REINSTATEMENT

4. FEI Number 16-1541809

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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 *M. L. Smith* MARCEY L. SMITH, ASST. SECY. 10-25-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$550.00**
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KONG, RAYMOND 2/F GARMENT CENTRE, 576 CASTLE PEAK RD. KOWLOON, HONG KONG <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Yeung, Henry 2430-B Mariner Square Loop Alameda, CA 94501 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT COUROSSI, TIMOTHY 593 MASSACHUSETTS AVE. BOXBOROUGH MA 01719 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Couroussi, Timothy 70 Codman Hill Road Boxborough, MA 01719 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KUPSCH, JOHN 40 COMMERCE WAY, UNIT B TOTOWA NJ 07512 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200003463442-6 -11/15/00--01005--002 ****750.00 ****750.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAW, CHRISTINA 2/F GARMENT CENTRE, 576 CASTLE PEAK RD. KOWLOON, HONG KONG <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>11/13</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 9/22/00 607-758-6428
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)