25.00 FEE \$ ON OR BEFORE 07/31/2000 DATE DUE

STATE OF COLORADO BIENNIAL REPORT OF A CORPORATION OR LIMITED LIABILITY COMPANY

THIS FORM MUST BE TYPED

READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING

2000 REPORT YEAR SUBMIT SIGNED FORM WITH FILING FEE 05/01/2000 MAILING DATE REJECTED : INFORMATION BELOW IS ON FILE IN THIS OFFICE - DO NOT CHANGE PRE-PRINTED INFORMATION

CORPORATE NAME REGISTERED AGENT. REGISTERED OFFICE, CITY, STATE & ZIP FOR OFFICE USE ONLY 1428 DLLC STATE/COUNTRY OF INC HARDESTY CHRISTOPHER S SYS.TEST LABS, L.L.C. 6565 S SYRACUSE WAY #1804 ENGLEWOOD CO 80111 19961071428 20001094841 M \$ 25.00 SECRETARY OF STATE 05-10-2000 14:27:09 FIRST REPORT OR CORRECTIONS IN THIS COLUMN TYPE NEW AGENT NAME
1630 Welton St. Ste. 500
SIGNATURE OF NEW REGISTERED AGENT Return completed reports to: Department of State Corporate Report Section MUST HAVE A STREET ADDRESS 1560 Broadway, Suite 200 Denver, CO 80202 STATE CO Denver 80202 OFFICERS NAME AND ADDRESS TITLE 20001099954 \$ 25.00 SECRETARY OF STATE 05-17-2000 12:55:36 (If you have less than 3 shareholders, you may list less than 3 directors) DIRECTORS OR LIMITED LIABILITY COMPANY MANAGERS PHILLIPS BRIAN T (MANAGER) 6040 MONTVIEW BLVD DENVER CO 80207 DEMVER CO SOAS HARDESTY CHRISTOPHER S (MGR) 6565 S SYRACUSE WAY #1804 ENGLEWOOD CO 80111 Address of Principal Place of Business 1630 Welton St. Ste.500 city ___Denver State <u>CO</u> --- Zip <u>80202</u> **SIGNATURE** Under penalties of perjury and as an authorized officer, I declare that this biennial report and, if applicable, the statement of change of registered office and/or agent, has been examined by me and is, to the best of my knowledge and belief true, correct, and complete. andes

TITLE _ Mana er

May 11, 10-2000 DATE

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NOTE: DO NOT USE THIS BOX IF THIS IS YOUR FIRST REPORT!!! SEE INSTRUCTIONS ON REVERSE. IF THERE ARE NO CHANGES SINCE YOUR LAST REPORT, MARK THIS BOX, SIGN ABOVE AND RETURN WITH THE FEE AND BY THE DATE DUE INDICATED ABOVE(UPPER LEFT HAND CORNER). IF YOU ARE FILING AFTER THE DATE DUE ABOVE, CONTACT THIS OFFICE FOR THE PROPER FEE. (303) 894-2251

SEE INSTRUCTIONS ON BACK

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