## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # 711468  1. Entity Name EL ORIDA SOCIETY FOR CLINICAL LABORATORY						FILED				
FLORIDA SOCIETY FOR CLINICAL LABORATORY SCIENCE, INC.				138		OLFEB 26 PM 3: 55  SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business         Mailing Address           260 NW 107 AVE         #101           260 NW 107 AVE         #101				L 1			SECRETARY	OF STATE A		
MIAMI, FL 33172 , US MIAMI, FL 39172 US				S			IALLMON			
11456 Night. Heron Drive 11456 Night				Heron		1 (1881) 1888 188	POLITICAL ALBEM DESALTANTA	. News whose Chair Cills Diff.	liki er i en i	
Naples FL 34119 2. Principal Place of Business				mde	34119					
2. Principal P	riace of Busir	less	3. Mailing Address			]	INI (IRII 81010 CIIDI (01) ARIII			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02232004	Chg-NP C	R2E037 (10/03)			
City & State		City & State			4. FEI Number 59-61773	312		plied For t Applicable		
Zip		Country	Zip	Countr	У	5. Certificate of	Status Desired	\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
NUNEZE	RIQUET	Α		'	Name Dr. Halcyon St. Hill					
6401 S.W.23 STREET MIAMI, FL 38155				,	Street Address (P.O. Box Number is Not Acceptable) 11456 Night Heron Drive					
WII ZWII,	04/00									
					City Naple	 s,		FL 34119	9	
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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE / Signature, typed or drinted name of registered agent and title if applicable. (NOTÉ: Registered Agent signature required when reinstating)  DATE										
Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to										
	_	lay 1, 2004	Trust Fund Co			\$5.00 May Be Added to Fees		Department of St		
10. OFFICERS AND DIRECTORS										
10.		OFFICERS AND DIF		11.			IGES TO OFFICERS A		10	
TITLE	PD		RECTORS Delete	TITLE	Pres	ident (PD	0)	AND DIRECTORS IN	10 Addition	
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TITLE NAME	FIALLO, A	NNA MARIA 07 AVE #101		TITLE NAME	Pres	ident (PD Malcyon St 56 Night	) . Hill Heron Driv	Change		
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