## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F04000001237

City-St-Zip:

FT. LAUDERDALE, FL 33309

FILED Oct 12, 2007 Secretary of State

Entity Name: SOUTH FLORIDA NATIONAL DIAGNOSTICS, INC. **Current Principal Place of Business: New Principal Place of Business:** 1100 W. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33309 **Current Mailing Address: New Mailing Address:** 1100 W. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33309 FEI Number: 20-0227335 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition SCANTLEBURY, DONNA Name: LUCHIK, SUSAN Name: 1100 W. COMMERCIAL BLVD. 1100 W. COMMERCIAL BLVD. Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33309 City-St-Zip: FT. LAUDERDALE, FL 33309

Title: Title: (X) Change ( ) Addition () Delete GREENSTEIN, JASON ESQ. SCANTLEBURY, DONNA Name: Name: 1100 W. COMMERCIAL BLVD. 1100 W. COMMERCIAL BLVD. Address: Address: FT. LAUDERDALE, FL 33309 FT. LAUDERDALE, FL 33309 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition GILNER, PAUL GILNER, PAUL Name: Name: 1100 W. COMMERCIAL BLVD. 1100 W. COMMERCIAL BLVD. Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33309 City-St-Zip: FT. LAUDERDALE, FL 33309 Title: () Delete Title: (X) Change ( ) Addition RIEVMAN, DEBRA RIEVMAN, DEBORAH Name: Name: 1100 W. COMMERCIAL BLVD. Address: Address: 1100 W. COMMERCIAL BLVD.

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.

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SIGNATURE: PAUL GILNER D 10/12/2007