2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000014982

Entity Name: SIGNET DIAGNOSTIC CORPORATION

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
3555 FISC 8 & 9	AL CT				
	33404 BCH, FL	US			
Current Mailing Address:			New Mailing Address:		
3555 FISC	AL CT				
8 & 9 RIVIERA E	33404 BCH, FL	US			
FEI Number	: 65-0392284	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired (X)	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:	
	MARK J H TERRACE N ACH GARDENS	, FL 33410 US			
	named entity sue of Florida.	ubmits this statement for the p	urpose of changing i	ts registered office or registered agent, or both,	
SIGNATUI	RE:				
	Electronic	Signature of Registered Age	nt	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CD ()[PASULA, MARK (15865 79TH TER PALM BCH GARI	R N.	Title: Name: Address: City-St-Zip:	CD (X) Change () Addition PASULA, MARK J PH.D. 15865 79TH TERR N. PALM BCH GARDENS, FL 33410	
Title: Name: Address: City-St-Zip:	HOFFMAN, MICH 13324 WHISPER	Delete IAEL LING LAKES LANE ARDENS, FL 33418	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () [DAVIS, JERRY II 1208 SUNSET AV PERRY, GA		Title: Name: Address: City-St-Zip:	VD (X) Change () Addition DAVIS, JERRY III 1208 SUNSET AVE PERRY, GA 31069	
Title: Name: Address: City-St-Zip:	TSD () [SOUZA, ROBER 355 ELLAMAR R WEST PALM BE	OAD	Title: Name: Address: City-St-Zip:	VTSD (X) Change () Addition SOUZA, ROBERT 355 ELLAMAR ROAD WEST PALM BEACH, FL 33405	
Title: Name: Address: City-St-Zip:	VD () [DEMITCHELL, E 2220 N 47TH AVI HOLLYWOOD, F	≣	Title: Name: Address: City-St-Zip:	V (X) Change () Addition DEMITCHELL, ETHAN 2220 N 47TH AVE HOLLYWOOD, FL 33021	

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: ROBERT A. SOUZA V 04/13/2009