

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K81439

**FILED**  
**Jan 21, 2011**  
**Secretary of State**

**Entity Name:** ADVANCED ELECTRONIC DIAGNOSTICS, INC.

**Current Principal Place of Business:**

1128 ROYAL PALM BCH BLVD  
#277  
ROYAL PALM BCH, FL 33411 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 221106  
WEST PALM BEACH, FL 334221106 US

**New Mailing Address:**

**FEI Number:** 59-2663588

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NILSSON, NILS  
13719 87TH ST N  
WEST PALM BEACH, FL 33412 US

**Name and Address of New Registered Agent:**

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:**

Title: P  
Name: NILSSON, NILS  
Address: 13719 87TH ST N  
City-St-Zip: WEST PALM BEACH, FL 33412 US

I hereby 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 all other like empowered.

SIGNATURE: NILS NILSSON

PRES

01/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date