

2013 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A10000000843

Entity Name: MIAMI INTERNATIONAL DIAGNOSTICS, LLLP

Current Principal Place of Business:

160 NW 170TH STREET
NORTH MIAMI, FL 33169

Current Mailing Address:

PO BOX 530543
MIAMI SHORES, FL 33153

FEI Number: 26-3612601

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREEN, MITCHELL F
4000 HOLLYWOOD BLVD., SUITE 485-SOUTH
HOLLYWOOD, FL 33021 US

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

General Partner Detail :

Document #

Name GROPPER, ADAM

Address PO BOX 530543

City-State-Zip: MIAMI SHORES FL 33153

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 a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ADAM GROPPER

MGR

02/06/2013

_____ Electronic Signature of Signing General Partner Detail

_____ Date