

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000001008

**FILED**  
**Feb 21, 2018**  
**Secretary of State**  
**CC1765788434**

**Entity Name:** DADE RESEARCH ASSOCIATES INC.

**Current Principal Place of Business:**

2600 SOUTH DOUGLAS ROAD  
SUITE 900  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2600 SOUTH DOUGLAS ROAD  
SUITE 900  
CORAL GABLES, FL 33134 US

**FEI Number:** 82-0938530

**Certificate of Status Desired:** No

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

RIESCO, JOSE  
2600 SOUTH DOUGLAS ROAD  
SUITE 900  
CORAL GABLES, FL 33134 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

**Officer/Director Detail :**

Title P  
Name MANZANO, JESSE  
Address PO BOX 348068  
City-State-Zip: CORAL GABLES FL 33234

Title VP  
Name CASTILLO, GABRIELA  
Address 2600 SOUTH DOUGLAS ROAD, SUITE 900  
City-State-Zip: CORAL GABLES FL 33134

Title S  
Name RIESCO, JOSE  
Address 2600 SOUTH DOUGLAS ROAD  
City-State-Zip: CORAL GABLES FL 33134

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOSE RIESCO

S

02/21/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date