

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H78563

Entity Name: MOBILE DIAGNOSTICS, INC.

Current Principal Place of Business:

1717 N E STREET
STE 320
PENSACOLA, FL 32501

Current Mailing Address:

1717 N E ST
STE 320 ATTN MARY MATHEWS
PENSACOLA, FL 32501 US

FEI Number: 59-2864191

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALLAHAN, ELIZABETH
1717 N E STREET
STE 320
PENSACOLA, FL 32501 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 PD
Name PORTER, JOHN
Address 1717 NORTH E ST STE 320
City-State-Zip: PENSACOLA FL 32501

Title VPD
Name PEACOCK, WAYNE
Address 1000 W. MORENO ST.
City-State-Zip: PENSACOLA FL 32501

Title TD
Name MCGEE, ELEANOR
Address 1717 NORTH E ST STE 321
City-State-Zip: PENSACOLA FL 32501

Title AS
Name MATHEWS, MARY
Address 1717 NORTH E ST STE 320
City-State-Zip: PENSACOLA FL 32501

Title RECORDING SECRETARY
Name GORAUM, TRINA
Address 1717 NORTH E ST.
STE. 320
City-State-Zip: PENSACOLA FL 32501

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: MARY MATHEWS

AS

04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date