2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2013
Secretary of State
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Entity Name: BOSTON HEART DIAGNOSTICS CORPORATION

Current Principal Place of Business:

175 CROSSING BOULEVARD
FRAMINGHAM, MA 01702

Current Mailing Address:

175 CROSSING BOULEVARD
FRAMINGHAM, MA 01702

FEI Number: 20-8833340

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	PRESIDENT, DIRECTOR
Name	HERTZBERG, SUSAN
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 01702

Title	DIRECTOR, CHAIRMAN
Name	PARKER, PETER
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 07102

Title	DIRECTOR
Name	SCHAEFER, ERNST J
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 07102

Title	DIRECTOR
Name	CRISAN, JEFF
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 01702

Title	SECRETARY
Name	YUNES, FRANK ESQ.
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 07102

Title	VP
Name	BRACUTI, KIM
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 07102

Title	DIRECTOR
Name	LIMKAKENG, ALICE
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 07102

Title	DIRECTOR
Name	AVELLONE, JOSEPH
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 01702

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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: FRANK YUNES SECRETARY 04/18/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MADSEN, REBECCA
Address	175 CROSSING BOULEVARD
City-State-Zip:	FRAMINGHAM MA 01702