

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

05 JUN -1 AM 10:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # *FD100000029*

**1. Corporation Name**

AMERICAN DIAGNOSTIC MEDICINE, INC.

**2. Principal Office Address**

3404 NO

Suite, Apt. #, etc.

City & State

BEVERLY HILLS, FL

Zip

34465

Country

**3. Mailing Office Address**

960 INDUSTRIAL DR

Suite, Apt. #, etc.

STE 7

City & State

ELMHURST, IL

Zip

60126

Country

**4. Date Incorporated or Qualified  
To Do Business in Florida**

01/02/2001

**5. FEI Number**

36-3351715

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Chris Richard

Street Address (P.O. Box Number is Not Acceptable)

3933 Moreno Dr.

Suite, Apt. #, Etc.

City

Palm Harbor

State

FL

Zip Code

34685

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip    |
|--------|--------------------------------------|---|-----------------------|
| Pres.  | Chris Richard                        | 3933 Moreno Dr.                                   | Palm Harbor, FL 34685 |
| V.P.   | Anand Kancherlapalli                 | 960 Industrial Dr. Ste 7                          | Elmhurst, IL 60126    |
| Secr.  | Sam Kancherlapalli                   | 960 Industrial Dr. Ste 7                          | Elmhurst, IL 60126    |
| CFO    | Rick Nassenstein                     | 960 Industrial Dr. Ste 7                          | Elmhurst, IL 60126    |
|        |                                      |   |                       |
|        |                                      |   |                       |

**10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.**

SIGNATURE:

Rick Nassenstein

5/27/05

630-834-7100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E081 (01/05)

REINSTATEMENT 03-05