2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 28, 2005 8:00 am Secretary of State 02-28-2005 90182 027 ***150.00

DOCUMENT # F0100000701 1. Entity Name MDX INTERNATIONAL, INC.									02-28-2005	90182 027 ***15	50.00
Principal Place of Business Mailing Address							\dashv		700×00F	~ T	
959 E. WALNUT ST., STE 290 PASADENA, CA 91106			95	959 E. WALNUT ST., STE 290 PASADENA, CA 91106					12/21 /1211 221H 2211 42	iki BBIN BE'IN BBYL IFBII BBIBI	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.					01112005	Chg-P	CR2E034 (10/03)
City & State			City & State					4. FEI Number 95-4622			opplied For Not Applicable
Zip	1	Country	Z	ip	Count	try			of Status Desired	☐ \$8.75 Ac Fee Requir	
	6. Name	and Address of Curren	t Regist	ered Agent				7. Name and /	Address of New I	Registered Agent	
MARCY T	HOMASI	··· <u> </u>		.		Name Mascus Thomas L.					
MARCY, THOMAS L 329 MISTY OAKS RUN						Street Address (P.O.JBox Number is Not Acceptable)					
CASSELBERRY, FL 32707					1182	2 N	Rona	ld Rea	gan B	lvď	
i						City Long wood FL Zip Code 30 7.50					
		y submits this statement	for the p	urpose of changing its re	egistere	d office or re			n, in the State of F	lorida. I am familiar with	n, and accept
the obligations of registered agent. SIGNATURE O2 -23-05											
SIGNATURE Signature speak or finited name of registered agent and title if applicable. In the sequence of the											
				<i>D</i>			n indianity is				
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Intereup ceruly that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. If further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: (

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR PRECTOR

02-23-05 3212740153

Daytime Phone #