## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F01000003899

Address:

City-St-Zip:

Entity Name: VISIBLE GENETICS CORP.

FILED Jan 03, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 25 CRESTRIDGE DR. SUWANEE, GA 30024 **Current Mailing Address: New Mailing Address:** 25 CRESTRIDGE DR SUWANEE, GA 30024 FEI Number: 23-2876035 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition DALY, RICHARD T DALY, RICHARD T Name: Name: 700 BAY ST., SUITE 1000/TORONTO, ONTARIO 1233 UNIVERSITY AVENUE Address: Address: City-St-Zip: CANADA M5G 1Z6, City-St-Zip: PALO ALTO, CA 94301 Title: DT Title: () Change () Addition () Delete Name: CLARKE, THOMAS J Name: 25 CRESTRIDGE DR. Address: Address: SUWANEE, GA 30024 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete (X) Change ( ) Addition ELLIS, TIMOTHY Name: ELLIS, TIMOTHY Name: 25 CRESTRIDGE DR. 12970 WYCKLAND DRIVE Address: Address: City-St-Zip: SUWANEE, GA 30024 City-St-Zip: CLIFTON, VA 30024 Title: ( ) Delete Title: () Change () Addition ETHIER, MARGUERITE Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: THOMAS J CLARKE CFO 01/03/2003

700 BAY ST, SUITE 1000, TORONTO, ONTARIO

CANADA M5G 1Z6.