

2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000003299

FILED
Apr 02, 2012
Secretary of State

Entity Name: JOLI DIAGNOSTIC INCORPORATED

Current Principal Place of Business:

2451 WEHRLE DR
WILLIAMSVILLE, NY 14221

New Principal Place of Business:

Current Mailing Address:

2451 WEHRLE DRIVE
WILLIAMSVILLE, NY 14221

New Mailing Address:

2451 WEHRLE DR
WILLIAMSVILLE, NY 14221

FEI Number: 16-1454895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: JUDITH REYES

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CHRM
Name: WIDJAJA, KUSUMA L MD
Address: J1: GANDARIA 1/4 5A
City-St-Zip: JAKARTA SELATAN INDONESIA,

Title: VCHR
Name: HINZWIDJAJA, RIKO
Address: GLOCKEN STRASSE 24
City-St-Zip: 4076 DUSSELDORF GERMANY,

Title: SD
Name: ROSSI, THOMAS M MD
Address: 355 LOG CABIN ROAD
City-St-Zip: VICTOR, NY 14564

Title: P
Name: WANG, GLORIA MD
Address: 8395 BLACK WALNUT STREET
City-St-Zip: AMHERST, NY 14051

Title: LDT
Name: TJOTA, AMIN MD
Address: 1221 SOUTH 284TH STREET
City-St-Zip: FEDERAL WAY, WA 98003

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: AMIN TJOTA, M.D.

LDT

04/02/2012

Electronic Signature of Signing Officer or Director

Date