

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007296

FILED
Apr 18, 2007
Secretary of State

Entity Name: AMERICAN DIAGNOSTICS SERVICES, INC.

Current Principal Place of Business:

7150 N PARK DR
STE 560
PENNSAUKEN, NJ 08109

New Principal Place of Business:

Current Mailing Address:

7150 N PARK DR
STE 560
PENNSAUKEN, NJ 08109

New Mailing Address:

FEI Number: 23-2722771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: ZINGARELLI, ANTHONY
Address: 101 WEST AVE - STE 300
City-St-Zip: JENKINTOWN, PA 19046

Title: VPD () Delete
Name: BRENNAN, MARY JO
Address: 7150 N PARK DR - STE 560
City-St-Zip: PENNSAUKEN, NJ 08109

Title: STD () Delete
Name: MORRISON, ALAN E
Address: 101 WEST AVE - STE 300
City-St-Zip: JENKINTOWN, PA 19046

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZINGARELLI, ANTHONY
Address: 101 WEST AVE - STE 300
City-St-Zip: JENKINTOWN, PA 19046

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: MARY JO BRENNAN

VPD

04/18/2007

Electronic Signature of Signing Officer or Director

Date