

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007296

FILED  
Jan 18, 2010  
Secretary of State

**Entity Name:** AMERICAN DIAGNOSTICS SERVICES, INC.

**Current Principal Place of Business:**

6981 NORTH PARK DRIVE  
STE 506  
PENNSAUKEN, NJ 08109

**New Principal Place of Business:**

**Current Mailing Address:**

6981 NORTH PARK DRIVE  
STE 506  
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:** PD  
**Name:** BRENNAN, MARY JO  
**Address:** 6981 NORTH PARK DRIVE - STE 506  
**City-St-Zip:** PENNSAUKEN, NJ 08109

**Title:** VPD  
**Name:** ZINGARELLI, ANTHONY  
**Address:** 101 WEST AVE - STE 300  
**City-St-Zip:** JENKINTOWN, PA 19046

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

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:** MARY JO BRENNAN

PD

01/18/2010

Electronic Signature of Signing Officer or Director

Date