

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002517

Entity Name: DIAGNOCURE INC.

FILED
Jan 04, 2011
Secretary of State

Current Principal Place of Business:

2050 RENE-LEVESQUE BLVD WEST
6TH FLOOR
QUEBEC CANADA, QC G1V2K8

New Principal Place of Business:

Current Mailing Address:

2050 RENE-LEVESQUE BLVD WEST
6TH FLOOR
QUEBEC CANADA, QC G1V2K8

New Mailing Address:

FEI Number: 98-0559663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: MME
Name: PROULX, LOUISE
Address: 101 BOUL MONT-ROYAL APP 506
City-St-Zip: OUTREMONT (QUEBEC) H2V 2H4, QC XX

Title: MR
Name: GOBEIL, PAUL
Address: 44 RUE BERLIOZ ILE DES SOEURS
City-St-Zip: VERDUM (QUEBEC) H3E 1L9, QC XX

Title: MR
Name: THOMAS, MARIO
Address: 2551 RUE DU MINERVOIS
City-St-Zip: SAINT LAZARE (QUEBEC) H2V4P1, QC XX

Title: MR
Name: FRADET, YVES
Address: 170 RUE ST-PAUL #505
City-St-Zip: QUEBEC (QUEBEC) G1K3W1, QC XX

Title: MR
Name: COTE, MICHEL
Address: 200 HERMITAGE RD APP 20 R.R.3
City-St-Zip: MAGOG (QUEBEC) J1X 3W4, QC XX

Title: MR
Name: ZURAWSKI, VINCENT R JR
Address: PO BOX 417
City-St-Zip: WESTOWN, PA 193950417

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: FREDERIC BOIVIN

MR

01/04/2011

Electronic Signature of Signing Officer or Director

Date