2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000002997

Entity Name: ALMAC DIAGNOSTIC LIMITED CORPORATION

FILED Apr 24, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
20 SEAGOE INDUSTRIAL ESTATE	20 SEAGOE INDUSTRIAL ESTATE

CRAIGAVON, BT63 5QD CRAIGAVON, BT63 5QD

N. IRELAND, UNITED KINGDOM, OC N. IRELAND, UNITED KINGDOM, NA OC

Current Mailing Address: New Mailing Address:

20 SEAGOE INDUSTRIAL ESTATE 20 SEAGOE INDUSTRIAL ESTATE CRAIGAVON, BT63 5QD CRAIGAVON, BT63 5QD

N. IRELAND, UNITED KINGDOM, OC N. IRELAND, UNITED KINGDOM, NA OC

FEI Number: 98-1010779 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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 US

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: [

Name: ARMSTRONG, ALAN

Address: 20 SEAGOE INDUSTRIAL ESTATE, CRAIGAVON City-St-Zip: N. IRELAND, UNITED KINGDOM, BT63 5QD OC

Title: D/S

Name: HAYBURN, COLIN

Address: 20 SEAGOE INDUSTRIAL ESTATE, CRAIGAVON City-St-Zip: N. IRELAND, UNITED KINGDOM, BT63 5QD OC

Title: P/D

Name: HARKIN, PAUL

Address: 19 SEAGOE INDUSTRIAL ESTATE, CRAIGAVON City-St-Zip: N. IRELAND, UNITED KINGDOM, BT63 5QD OC

Title: S

Name: STEPHENS, KEVIN

Address: 20 SEAGOE INDUSTRIAL ESTATE, CRAIGAVON City-St-Zip: N. IRELAND, UNITED KINGDOM, BT63 5QD OC

Title:

Name: JOHNSTON, PATRICK

Address: 19 SEAGOE INDUSTRIAL ESTATE, CRAIGAVON City-St-Zip: N. IRELAND, UNITED KINGDOM, BT63 5QD OC

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: COLIN HAYBURN D 04/24/2012