SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400000353 (2) DIASONICS ULTRASOUND, INC.

FILED Aug 12 1997 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address										
2860 DE LA CRUZ BLVD		1565 BARBER LANE						İ				
SANTA CLARA CA \$5050			MILPITAS CA 95035									
US								DO NOT WRITE IF	N THIS	SPACE		
								3. Date Incorporated or Qualified 01/13/1994		ate of Last F 02/1996	Report	
2. Principal F	Place of Business	2a	Mailing Address					4. FEI Number		I A	pplied For	
21			26 2860 DE LA CRUZ BLVD					77-0335612			ot Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.					E Outflows - Donied		\$8.75	Additional	
22		27						5. Certificate of Status Desired	\Box	Fee R	equired	
City & State			City & State					6. Election Campaign Financing		\$5.00	May Be	
23		28	SANTA CI	AR.	AC.	A		Trust Fund Contribution	\square $_$		to Fees	
Zip	Country		Zip		Count	ry		8. This corporation owes or has paid	the cu	rrent year In	tangible	
24	25	29	95050	30	_US	A		Personal Property Tax due June 3	o. [☐ Yes [No No	
	9. Name and Address of Curre	nt Regis	stered Agent					10. Name and Address of New Regi	stered	Agent	·	
CT	CORPORATION SYSTEM				8	1	Name					
1200 S. PINE ISLAND RD.					A	82 Street Address (P.O. Box Number is Not Acceptable)						
PLAI	NTATION FL 33324				٦	٦	011001711	daross (1.0. cox Harrison is Hot Hocoptable	7			
					8	3						
					Ļ	4	O'L			1001 7	<u> </u>	
					8	4	City		FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 6	07.1508, Florida Stat	utes, th	ne abo	ve-	named c	orporation submits this statement for the pur			ts registered	
office or	registered agent, or both, in the Stat	e of Flori	da. Such change was	s autho	rized b	by I	the corpo	orporation submits this statement for the pur ration's board of directors. I hereby accept	the app	ointment as	registered	
	am tamiliar with, and accept the oblig	jations o	ii, 5000001 607.0303, i	rionda	Siaiui	85.						
SIGNATURE	Signature, typed or printed name of registered as	ent and litte	Mannicable (No	OTE Ren	istored A	neni	I signature re	quired when reinstating)	DATE	····		
12.	OFFICERS AT				13.	9	-	ADDITIONS/CHANGES TO OFFICE		DIRECTO	RS IN 12	
TITLE	PD		☐ DELETE		1.1 TITLE	_	T	PRESIDENT		Change	Addition	
NAME	EMMANUEL, GILL			1	1.2 NAM	F				Λ.		
STREET ADDRESS	2880 DE LA CRUZ BLVD				1.3 STRE		IDDRESS	DANIEL E. MCNULTY				
CITY-ST-ZIP	SANTA CLARA CA				1.4 CITY		1	2860 DE LA CRUZ BLVI	SA	NTA C	LARA.C	
TITLE	SECR		DELETE		2.1 TITLE		- 215			Change	Addition	
NAME	JETT, DAN T			- 1	2.2 NAMI		1			onlingo	/ radition	
· · ·	2860 DE LA CRUZ BLVD				-		ADDEAD					
STREET ADDRESS	SANTA CLARA CA			- 1	2.3 STRE		- 1					
CITY-ST-ZIP	DCEO		☐ DELETE		2 4 CiTY		- ZIP			Tal Channe	Addition	
TITLE	GILL, EMMANUEL		☐ DETELE		3.1 TITLE			GENERAL MANAGER/V	P	Change	Addition	
NAME					3.2 NAM			ROBERT MATHEWS				
STREET ADDRESS	1565 BARBER LANE			- 1	3.3 STRE	ET A	DDRESS	2860 DE LACRUZ BLVD				
CITY-ST-ZIP	MILPITAS CA			_	3.4. CITY	_	- ZIP	SANTA CLARA CA 950	<u>50</u>			
TITLE	CFO		DELETE		4.1 TITLE			CFO		Change	Addition	
NAME	ODED, TAMIR				4. 2 NAM	E	1	SWENSON, SWEN				
STREET ADDRESS	2860 DE LA CRUZ BLVD				4.3 STRE	et A	DDRESS	2860 DE LA CRUZ BLV	۷D			
CITY-ST-ZIP	SANTA CLARA CA				4.4 CITY	ST-	- ZIP	SANTA CLARA CA 95				
TITLE	D		DELETE		5.1 TITLE					Change	Addition	
NAME	GALIL, UZIA				5.2 NAMI	E	į					
STREET ADDRESS	1565 BARBER LANE			•	5 3 STAE	ET A	DDRESS	2860 DE LA CRUZ BL	√D			
CITY-ST-ZIP	MILPITAS CA				5.4 CITY-		i	SANTA CLARA CA 95	050			
TITLE			DELETE	_	6.1 TITLE			DIRECTOR		Change	X Addition	
NAME	1				6.2 NAME		- {	EMMANUEL GILL		3.		
STREET ADDRESS	1				6.3 STRE		DDRESS	2860 DE LA CRUZ BLV	VD.			
							1					
CITY-ST-ZIP	1				6.4 CITY -	-51-	- 217	SANTA CLARA CA 95	บอบ			

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the compration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if I larged or on an attention with an address.