## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600000403 (3)

NMC DIAGNOSTIC SERVICES, INC.

## **FILED** May 12 1998 8:00am Secretary of State

|   |  |  |  | ···                                      |                                   |  | I MANAGA TANA ARAN ARAN ARAN ARAN ARAN ARAN ARA  |  |
|---|--|--|--|--|-----------------------------------|--|--|--|
| Principal Place of Business Mailing Address   |  |  |  |  |                                   |  | a remires trif raus faus main marri dent batte marri men bant batte  |  |
| 1   | is hayden ave<br>601 trapelo Rd.<br>Exington Ma 921<br>Js                      | 73   |  | 1801 TRAPELO RD.<br>LEXINGTON MA 02173   |                                   |  | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  01/24/1996  |  |
| 2.  | Principal Place of Business 2a. Mailing Address                                |  |  |  | *                                 | 4. FEI Number Applied For  |  |  |
| 21  |  |  | 26   | 26                                       |                                   |  | 04-3212215 Not Applicable  |  |
| 22  | Suite, Apt. #, etc 2   |  | Suite, Apt. #, etc. 27   | Suite, Apt. #, etc.                      |                                   |  | 5. Certificate of Status Desired See Required Fee Required   |  |
| City & State  |  | City & State   | 28   |  |                                   | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees |  |  |
| 24  | Zip  | Country 25   | Ζφ<br><b>29</b> ]  | 30                                       | Country                           |  | This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30.   |  |
| 9. Name and Address of Current Registered Agent   |  |  |  |  |                                   | 10. Name and Address of New Registered Agent   |  |  |
| C T CORPORATION SYSTEM<br>1200 SOUTH PINE ISLAND ROAD<br>PLANTATION FL 33324  |  |  |  |  | 81<br>82                          |  |  |  |
|   |  |  |  |  | 83                                |  |  |  |
|   |  |  |  |  |                                   | City   | FL 85 Zip Code   |  |
| 11  | <ul> <li>Pursuant to the<br/>office or register<br/>agent. I am fam</li> </ul> | provisions of Sections<br>red agent, or both, in t<br>iliar with, and accept t | 607 0502 and 607.1508, Florida 5 the State of Florida. Such change the obligations of, Section 607.050 | Statutes, th<br>was autho<br>05, Florida | ne above<br>orized by<br>Statutes | e-named<br>the corp<br>s.  | I corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered |  |
| SIGNATURE Signature, typed or printed times of registered agent and titled again able (NOTE Registered Agent signature required when reinslating)  DATE |  |  |  |  |                                   |  |  |  |
| 12  |  | OFFICERS AND DIRECTORS 13.   |  |  |                                   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                    |  |  |
| ŤtT.  | LE P   | P DELETE 1.11  |  | 1.1 TITLE                                |                                   | Change Addition  |  |  |

NAME SWETT, GEOFFREY 1601 TRAPELO ROAD STREET ADDRESS 1.3 STREET ADDRESS WALTHAM MA CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2 f TITLE SWETT, GEOFFREY NAME 1601 TRAPELO ROAD STREET ADDRESS WALTHAM MA CITY-ST-ZIP Change \_\_ Addition TITLE KEMBEL, DAVID A NAME 1601 TRAPELO ROAD STREET ADDRESS 3.3 STREET ADDRESS WALTHAM MA CITY-ST-ZIP 3.4 CITY-ST-ZIP Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-S1-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filing 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 corporation 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 changed, or on an attachment with an address. ASS'T TREASURER

SIGNATURE:

28/ 402 9000

j

## NMC DIAGNOSTICS SERVICES, INC.

## LIST OF OFFICERS AND DIRECTORS EFFECTIVE 2/24/98

| DIRECTORS          | OFFICE HELD         | BUSINESS ADDRESS                        |
|--------------------|---------------------|---|
| GEOFFREY W. SWETT  | DIRECTOR            | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| BEN J. LIPPS       | DIRECTOR            | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| OFFICERS           | OFFICE HELD         | BUSINESS ADDRESS                        |
| GEOFFREY W. SWETT  | PRESIDENT           | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| SYED KAMAL         | VICE PRESIDENT      | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| PATRICK MORIARTY   | VICE PRESIDENT      | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| JOSEPH J. RUMA     | VICE PRESIDENT      | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| RONALD J. KUERBITZ | VICE PRESIDENT      | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| HEINZ J. SCHMIDT   | TREASURER           | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| MARC S. LIEBERMAN  | ASSISTANT TREASURER | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| JAMES V. LUTHER    | ASSISTANT TREASURER | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| DOUGLAS G. KOTT    | SECRETARY           | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| DAVID A. KEMBEL 🗸  | ASSISTANT SECRETARY | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |
| MARK C. WILSON     | ASSISTANT SECRETARY | 95 HAYDEN AVENUE<br>LEXINGTON, MA 02173 |