2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9600000403 1. Entity Name NMC DIAGNOSTIC SERVICES, INC.							Secretary of State 04-24-2002 90442 001 *3,800.00			
NMC DIA	GNOSTIC	SERVICES, INC.	`	\	J		04-24-2002 90442	. 001 *3,800	.00	
Principal Plac	e of Busines	8	Mailing Address							
95 HAYDEN AVENUE 95 HAYDEN AVENUE LEXINGTON MA 32420 LEXINGTON MA 32420										
US US										
95 HAYDEN AVENUE			3. Mailing Address 95 HAYDEN AVENUE				DO NOT WRITE IN THIS SPACE			
Suite, Apt. #, etc.			Suite, Apt. #, etc.							
City & State LEXINGTON, MA			City & State LEXINGTON, MA			4.	04-3212215	No	pplied For ot Applicable	
Zip 02420	-9192	Country USA	Zip 02420-9192	Cour	itry I SA	5.	Certificate of Status Desired	\$8.75 Add Fee Require		
	6. Name	and Address of Current R	egistered Agent			7.	Name and Address of New Registere	d Agent		
					Name					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD					Street Address (P.O. Box Number is Not Acceptable)					
PLANTATI	ON FL 333	24								
					City		F	Zip Cod	e	
	oration is elig	or printed name of registered agent an	FILE NOW!!	! FEE	IS \$150.0		reinstating) DATI		0 May Be	
Tax filing requirement and elects to do so. (See criteria on back)			1	After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State			Trust Fund Contribution. Added to Fees			
11.	T	OFFICERS AND D	IRECTORS	12.		Α	DDITIONS/CHANGES TO OFFICERS A			
TITLE	PD	2M 1	☐ Delete	T(T) NAM				₹ Change	Addition	
NAME STREET ADDRESS	LIPPS, BE	:N J EN AVENUE			EET ADDRESS					
CITY-ST-ZIP	LEXINGTON MA 32420			CITY	'-ST-ZIP	LEXINGTON, MA 02420-9192				
TITLE NAME	S KEMBEL,		☐ Delete	TITL NAM	_			X Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP		EN AVENUE DN MA 32420			eet address '-st-zip	LEXINO	GTON, MA 02420-9192			
TITLÉ	T		☐ Delete	TITL	_		, , , , , , , , , , , , , , , , , , ,	Change	☐ Addition	
NAME STREET ADDRESS	LIEBERMA	NN, MARC EN AVENUE		NAM STRI	ie Eet address					
CITY-ST-ZIP		IN AVENUE IN MA 32420			-ST-ZIP	LEXTNO	GTON, MA 02420-9192		}	
TITLE	AT	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Delete	TITL	E			X Change	☐ Addition	
NAME	LUTHER,			NAM						
STREET ADDRESS CITY-ST-ZIP		en avenue On ma 32420			eet address '-st-zip	T EVINO	TEON WA 00/20 0102			
TITLE	LLMITOTO	THE OLYLO	☐ Delete	TITL	E		GTON, MA 02420-9192	Change	X Addition	
NAME	NAME			1E	ASSISTANT TREASURER PAUL COLANTONIO					
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS '-ST-ZIP	95 HAY	YDEN AVENUE GTON, MA 02420-9192		}	
TITLE			☐ Delete	TITL	E	DEVIN	520N; FIR UZ4ZU-717Z	☐ Change	☐ Addition	
NAME				NAM						
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS '-ST-ZIP					
13. Thereby of				the exe	mption stat		n 119.07(3)(i), Florida Statutes. I further o			
indicated of the cor	on this repor	rt or supplemental report is t	rue and accurate and that m vered to execute this report a	v siona	ture shall h	ave the same	e legal effect as if made under oath; that orida Statutes; and that my name appear	t I am an officer	or director	

SIGNATURE: 🚣 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PAUL COLANTONIO, ASST. TREAS.

04-02-02 Date

781-402-9000

Daytime Phone #

Aftachment #F 9600000 403

NMC DIAGNOSTIC SERVICES, INC.

LIST OF OFFICERS AND DIRECTORS EFFECTIVE 3/1/01

DIRECTORS	OFFICE HELD	BUSINESS
BEN J. LIPPS	DIRECTOR .	95 HAYDEN AVENUE LEXINGTON, MA 02420
OFFICERS	OFFICE HELD	BUSINESS
BEN J. LIPPS	PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARC S. LIEBERMAN	TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
PAUL J. COLANTONIO	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
JAMES V. LUTHER	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
DAVID A. KEMBEL	SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420

CORPORATE HEADQUARTERS
95 Hayden Avenue
Lexington, MA 02420