2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G41287

Address:

City-St-Zip:

171 MONROE LANE

LEXINGTON, SC 29072 US

Entity Name: CARDIO-STAT, INC.

FILED Feb 26, 2008 Secretary of State

| y | er c/\rbic | 017A1, 11 4 0. | | | |
|---|--|----------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| | ONGRESS AV RTH, FL 3346 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| P. O. BOX LEXINGTO | .1928 DN, SC 29071 | 1928 US | | | |
| FEI Number | : 59-2300879 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| 1200 S PIN PLANTATI | PORATION SY NE ISLAND RO ION, FL 33324 | DAD I US | | | |
| | e named entity : e of Florida. | submits this statement for the p | ourpose of changing its registered | I office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | Electror | ic Signature of Registered Ag | ent | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | DP (YOUNG, RONN 171 MONROE LEXINGTON, S | LANE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | ST (KEIM, JOHN D 171 MONROE LEXINGTON, S | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | DVP () HARDMAN, JAI |) Delete ⁄IES F | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: JOHN D. KEIM ST 02/26/2008