

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 18, 2001 8:00 am**  
**Secretary of State**  
 05-18-2001 90010 035 \*\*\*150.00

**DOCUMENT #** H43004  
 1. Entity Name  
**ZIM DIAGNOSTICS CORP.**

Principal Place of Business  
**20225 NE 34th COURT # 2212 AVENTURA, FL 33180**

Mailing Address  
**P.O. BOX 221880 HOLLYWOOD, FL 33022-1880 USA**

2. Principal Place of Business  
**P.O. BOX 221880**

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
**Hollywood, FL**

City & State  
 Suite, Apt. #, etc.

4. FEI Number  
**59-2506818**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**ENRIQUE L. ZAPATA c/o T.R. HERRERA FIN SVCS, INC. 1250 E. HALLANDALE BEACH BLVD # 1004 HALLANDALE, FL 33009**

7. Name and Address of New Registered Agent  
 Name  
**ENRIQUE L. ZAPATA c/o T.R. HERRERA FIN SVCS, INC.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1250 E. HALLANDALE BEACH BLVD # 1004**  
 City  
**HALLANDALE** FL Zip Code  
**33009**

8. 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 *Enrique L. Zapata* DATE **04/24/01**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD ENRIQUE L. ZAPATA</b> <input type="checkbox"/> Delete <b>20225 NE 34th COURT # 2212 N. MIAMI BEACH, FL 33180</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD ENRIQUE L. ZAPATA</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>1250 E. HALLANDALE BEACH BLVD # 1004 HALLANDALE, FL 33009</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Enrique L. Zapata* DATE **04/24/01** (954)927-7878  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)