

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H53419

FILED
Apr 29, 2009
Secretary of State

Entity Name: DIAMEDIX CORPORATION

Current Principal Place of Business:

2140 NORTH MIAMI AVE
ATTN: DUANE STEELE
MIAMI, FL 33127

New Principal Place of Business:

2140 NORTH MIAMI AVE
ATTN: MARK DEUTSCH
MIAMI, FL 33127

Current Mailing Address:

2140 NORTH MIAMI AVE
ATTN: DUANE STEELE
MIAMI, FL 33127

New Mailing Address:

2140 NORTH MIAMI AVE
ATTN: MARK DEUTSCH
MIAMI, FL 33127

FEI Number: 59-2536113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STEELE, DUANE
2140 NORTH MIAMI AVENUE
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

STRUBY, CHARLES
2140 NORTH MIAMI AVENUE
MIAMI, FL 33127 US

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: CHARLES STRUBY

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLARK, KEVIN
Address: 2140 N. MIAMI AVE.
City-St-Zip: MIAMI, FL 33127

Title: DCOO (X) Delete
Name: STEELE, DUANE
Address: 2140 N. MIAMI AVE
City-St-Zip: MIAMI, FL 33127

Title: VFST () Delete
Name: DEUTSCH, MARK
Address: 2140 NORTH MIAMI AVE
City-St-Zip: MIAMI, FL 33127

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STRUBY, CHARLES
Address: 2140 N. MIAMI AVE.
City-St-Zip: MIAMI, FL 33127

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: COB () Change (X) Addition
Name: DEBREGEAS, PATRICE
Address: 2140 NORTH MIAMI AVENUE
City-St-Zip: MIAMI, FL 33127

Title: D () Change (X) Addition
Name: CLARK, KEVIN
Address: 2140 NORTH MIAMI AVENUE
City-St-Zip: MIAMI, FL 33127

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.

SIGNATURE: MARK DEUTSCH

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date