FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 DEC 17 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K25541

1. Corporation Name
RADD LABORATORY CORPORATION

Principal Place of Business	Mailing Address
2450 HOLLYWOOD BLVD. HOLLYWOOD, FL 33020	2450 HOLLYWOOD BLVD. HOLLYWOOD, FL 33020

3. Date Incorporated or Qualified: 6/7/88
3a. Date of Last Report:

2. Principal Place of Business
21 8177 W. GLADES RD.
Suite, Apt. #, etc.
22 SUITE 216
City & State
23 BOCA RATON, FL 33434
Zip 24 Country 25

2a. Mailing Address
26 8177 W. GLADES RD.
Suite, Apt. #, etc.
27 SUITE 216
City & State
28 BOCA RATON, FL 33434
Zip 29 Country 30

4. FEI Number: 65-0073560 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
RONALD S. WAGNER, M.D.
2450 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020

10. Name and Address of New Registered Agent
81 Name: **RONALD S. WAGNER, M.D.**
82 Street Address (P.O. Box Number is Not Acceptable): **8177 W. GLADES RD.**
83 **SUITE 216**
84 City: **BOCA RATON** **FL** 85 Zip Code: **33434**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: Ronald S. Wagner — RONALD S. WAGNER — DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P/D	☐ DELETE	1.1 TITLE	P/D	☒ Change ☐ Addition
NAME	RONALD S. WAGNER		1.2 NAME	RONALD S. WAGNER	
STREET ADDRESS	2450 HOLLYWOOD BLVD.		1.3 STREET ADDRESS	8177 W. GLADES RD., SUITE 216	
CITY-ST-ZIP	HOLLYWOOD, FL 33020		1.4 CITY-ST-ZIP	BOCA RATON, FL 33434	
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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****750.00 ****750.00

REINSTATEMENT 97
SL 12-19-97

CR2E034 (9/96)

14. I do 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 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.

SIGNATURE: X Ronald Wagner RONALD WAGNER (561) 451-2234
SIGNATURE, NAME & TITLE OF CHIEF OFFICER OR DIRECTOR