

FILED

May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **K34676** (2)
Corporation Name
DIAGNOSTIC CYTOPATHOLOGY LABORATORY, INC.

Principal Place of Business: C/O THOMAS C. WALSER, 7015 BERACASA WAY, SUITE 201, BOCA RATON FL 33433
Mailing Address: C/O THOMAS C. WALSER, 7015 BERACASA WAY, SUITE 201, BOCA RATON FL 33433



DO NOT WRITE IN THIS SPACE

Date Incorporated or Qualified: **09/27/1988**
FEI Number: **65-0086492**
Certificate of Status Desired: \$8.75 Additional Fee Required
Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
This corporation owes or has paid the current year Intangible Personal Property Tax due June 30: Yes No

21 Principal Place of Business
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country
26 Mailing Address
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

Name and Address of Current Registered Agent
**WALSER, THOMAS C.
7015 BERACASA WAY
SUITE 201
BOCA RATON FL 33433**

Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

I, 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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
1.1 DP SANTAELLA, IDALIA 17792 FIELDBROOK CIR WEST BOCA RATON FL
1.2 S APORTELA, ESTRELLA C/O 17792 FIELDBROOK CIR W BOCA RATON FL
1.3 VP BACALLAO, ELVIA C/O 17792 FIELDBROOK CIR WEST BOCA RATON FL

13. ALL CHANGES TO OFFICERS AND DIRECTORS
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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***150.00

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 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 on Block 12 or Block 13 if changed, or on an attachment with an address.

IDALIA SANTAELLA

CR2E034 (10/97)