2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002112

City-St-Zip:

PINELLAS PARK, FL 33781

Entity Name: ACCLAIM DIAGNOSTICS L.L.C.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7660 66TH ST. N PINELLAS PARK, FL 33781 **Current Mailing Address: New Mailing Address:** 7660 66TH ST. N APT. 304 PINELLAS PARK, FL 33781 FEI Number: 59-3702751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AUSTIN, MOREEN 13307 WHISPERING PALMS PLACE 304 LARGO, FL 33774 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition EINHORN, RICHARD J Name: Name: Address: 2070 RED CEDAR LA.W. Address: City-St-Zip: CLEARWATER, FL 33763 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: AUSTIN, MOREEN A Name: Address: 13307 WHISPERING PALMS PL. #304 Address: City-St-Zip: LARGO, FL 33774 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BULSON, JEFFREY Name: Name: Address: 7641 66TH ST. N Address:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

City-St-Zip:

SIGNATURE: MOREEN A AUSTIN TRES 04/30/2007