

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045059

FILED
Jan 18, 2005
Secretary of State

Entity Name: PRECISE DIAGNOSTIC GROUP, LLC

Current Principal Place of Business:

20913 ST. ANDREWS BLVD.
STE. 66
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

20913 ST. ANDREWS BLVD.
STE. 66
BOCA RATON, FL 33433

New Mailing Address:

FEI Number: 80-0111511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARM, STEVEN ESQUIRE
2101 NW CORPORATE BLVD.
STE. 215
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

RAWET, IRWIN
4801 JOHNSON ROAD
STE 7
COCONUT CREEK, FL 33073 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: IRWIN RAWET

01/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HENNICK, LOREN
Address: 20913 ST. ANDREWS BLVD., STE. 66
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM () Delete
Name: RAWET, IRWIN
Address: 5849 N.W. 21ST AVENUE
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: IRWIN RAWET

MGR

01/18/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date