

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M08154

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: DADE HAMILTON INCORPORATED

**Current Principal Place of Business:**

2150 SW (CORAL WAY) 22ND STREET  
SUITE 5-C  
MIAMI, FL 33145

**New Principal Place of Business:**

**Current Mailing Address:**

2150 SW (CORAL WAY) 22ND STREET  
SUITE 5-C  
MIAMI, FL 33145

**New Mailing Address:**

FEI Number: 59-2688644      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

VALENZUELA, NESTOR S  
815 HARBOR DRIVE  
KEY BISCAYNE, FL 33149      US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: VALENZUELA, NESTOR  
Address: 815 HARBOR DRIVE  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: VALENZUELA, HELENA  
Address: 815 HARBOR DRIVE  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: VALENZUELA, CAROLINA  
Address: 815 HARBOR DRIVE  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: VALENZUELA, FELIPE  
Address: 815 HARBOR DRIVE  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D ( ) Delete  
Name: VALENZUELA, ALEXANDRA  
Address: 815 HARBOR DRIVE  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 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: NESTOR VALENZUELA

PD

01/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date