

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000110065

Entity Name: PAN AM DIAGNOSTIC SERVICES, INC.

FILED
Mar 23, 2006
Secretary of State

Current Principal Place of Business:

1820 N UNIVERSITY DR
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

410 WEST 45TH STREET
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-1057401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAHANA, ROBERTA D PRES
410 WEST 45TH ST
MIAMI BEACH,, FL 33140 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: PSTD () Delete
Name: KAHANA, ROBERTA D
Address: 410 WEST 45TH STREET
City-St-Zip: MIAMI BEACH, FL 33140

Title: VPD () Delete
Name: KAHANA, BARUCH D MD
Address: 410 W 45TH ST
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KAHANA, ROBERTA D
Address: 410 WEST 45TH STREET
City-St-Zip: MIAMI BEACH, FL 33140

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 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: ROBERTA D KAHANA

PRES

03/23/2006

Electronic Signature of Signing Officer or Director

Date