

AMENDMENT

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000043643 1. Entity Name AMERIDIAGNOSTICS, INC.				FILED 03 JUL 14 PM 12: 28 000021 SECRETARY OF STATE 07/14/03--0107#AL0231AS001, FL	
Principal Place of Business 1414 NW 107 AVE., STE. 310 MIAMI, FL 33172		Mailing Address 1414 NW 107 AVE., STE. 310 MIAMI, FL 33172		 CHECK HERE IF MAKING CHANGES	
2. Principal Place of Business 1414 NW 107 AVE (314) Suite, Apt. #, etc. MIAMI, FL		3. Mailing Address SAME Suite, Apt. #, etc.			
City & State MIAMI, FL		City & State			
Zip 33172	Country USA	Zip	Country		
4. FEI Number 65-1102723		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		Applied For Not Applicable	
6. Name and Address of Current Registered Agent ORTIZ, GUILLERMO 1414 NW 107 AVE., STE. 310 MIAMI, FL 33172			7. Name and Address of New Registered Agent Name Boris Nikolov Street Address (P.O. Box Number is Not Acceptable) 1414 NW 107 Ave (314) City MIAMI FL Zip Code 33172		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>B Nikolov - BORISLAV NIKOLOV</u> DATE <u>07/01/03</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when appointing)</small>					
FILING FEE: \$150.00 After May 1, 2003 Fee will be \$450.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE DO NAME ORTIZ, GUILLERMO STREET ADDRESS 1414 NW 107 AVE #314 CITY-ST-ZIP MIAMI, FL 33172	<input checked="" type="checkbox"/> Delete		TITLE President, Director NAME Boris Nikolov STREET ADDRESS 1414 NW 107 Ave (314) CITY-ST-ZIP MIAMI, FL 33172	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE Director NAME JUAN BIENVENIDO CORREA STREET ADDRESS 1414 NW 107 Ave (314) CITY-ST-ZIP MIAMI, FL 33172	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>7/7/03</u> Office Phone # <u>305-436 9955</u>		

CR20034 (10/02)

Ameridiagnostics, Inc.

1414 NW 107th Ave (314)
Miami, FL 33172

Phone (305) 436 9955
Fax (305) 436 8010

July 7, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Amended UBR

Please find enclosed a check for \$70.00 (\$61.25 Plus \$8.75 for the hard copy of the status) with the enclosed amendments. This is done, consistent with instructions received from your department as follows:

"To change, add or delete officers/directors and/or of a registered agent of a corporation after the uniform business report has been filed for the current filing year, an amended uniform business report must be filed. You may download that form from www.sunbiz.org. Go to "Download Filing Forms" and choose "Corporations" (Florida or Foreign). You need to download the uniform business report/annual report form and label the document "Amended" at the top. The fee to file the Amended UBR is \$61.25.

If you cannot download the form, you must submit a written request for a blank form to our mailing address and a form will be mailed to you. Our mailing address is: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

Leslie Sellers
Internet Access" – July 7, 2003

Guillermo Ortiz
Director

