

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033146

Entity Name: ATLANTIC DIAGNOSTICS CENTER, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

150 S. ANDREWS AVENUE
SUITE 350
POMPANO BEACH, FL 33069 US

Current Mailing Address:

P. O. BOX 741235
BOYNTON BEACH, FL 33474 US

New Principal Place of Business:

150 S. ANDREWS AVENUE
SUITE 410
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 56-2334301 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUER, BRIAN
4315 W TRADEWINDS AVE
LAUDERDALE BY THE SEA, FL 33308 US

Name and Address of New Registered Agent:

BAUER, BRIAN
4315 W TRADEWINDS AVE
LAUDERDALE BY THE SEA, FL 33308 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: BRIAN BAUER

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BAUER, BRIAN
Address: 4315 W TRADEWINDS AVE
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308 US

Title: S () Delete
Name: BAUER, JERRY
Address: 7278 KAHANA DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: BAUER, JERRY
Address: 7278 KAHANA DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437

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: BRIAN BAUER

DR

05/01/2008

Electronic Signature of Signing Officer or Director

Date