

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067767

FILED
Apr 30, 2009
Secretary of State

Entity Name: INSTITUTE OF DIAGNOSTIC STUDIES, INC.

Current Principal Place of Business:

13926 SW 47 STREET 2ND FLOOR
MIAMI, FL 33175

New Principal Place of Business:

13926 SW 47 STREET 2ND FLOOR
2ND FLOOR
MIAMI, FL 33175

Current Mailing Address:

13926 SW 47 STREET 2ND FLOOR
MIAMI, FL 33175

New Mailing Address:

13926 SW 47 STREET 2ND FLOOR
2ND FLOOR
MIAMI, FL 33175

FEI Number: 55-0837388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GREEN, JERRY
7700 N KENDALL DR
STE 507 THE GREENERY MALL
MIAMI, FL 33156 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: P () Delete
Name: MATTIA, ANTONIO
Address: 13926 SW 47TH ST
City-St-Zip: MIAMI, FL 33175

Title: VP () Delete
Name: MATTIA, MARC A
Address: 13926 SW 47TH ST
City-St-Zip: MIAMI, FL 33175

Title: S () Delete
Name: MATTIA, ELVA
Address: 13926 SW 47TH ST
City-St-Zip: MIAMI, FL 33175

Title: T () Delete
Name: MATTIA, MICHAEL A
Address: 13926 SW 47TH ST
City-St-Zip: MIAMI, FL 33175

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:

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: ANTONIO MATTIA

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date