

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117255

Entity Name: MDL DIAGNOSTIC LABS, INC.

FILED
Aug 02, 2006
Secretary of State

Current Principal Place of Business:

6500 NORTHWEST 16TH STREET
SUITE 3
PLANTATION, FL 33313

Current Mailing Address:

6500 NORTHWEST 16TH STREET
SUITE 3
PLANTATION, FL 33313

New Principal Place of Business:

2101 W. ATLANTIC BLVD
SUITE #101
POMPANO BEACH, FL 33069

New Mailing Address:

2101 W. ATLANTIC BLVD.
SUITE # 101
POMPANO BEACH, FL 33069

FEI Number: 52-2405361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: TALARICO, RAYMOND J
Address: 6500 NORTHWEST 16TH STREET #3
City-St-Zip: PLANTATION, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: TALARICO, RAYMOND J
Address: 2101 W. ATLANTIC BLVD., SUITE # 101
City-St-Zip: POMPANO BEACH, FL 33069

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: JACQUELYN GOGIN

MS.

08/02/2006

Electronic Signature of Signing Officer or Director

Date