

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000030254

Entity Name: PMC DIAGNOSTIC CO.

FILED  
Aug 07, 2006  
Secretary of State

## Current Principal Place of Business:

6175 W 20 AVE APT 306  
HIALEAH, FL 33012

## New Principal Place of Business:

850 WEST 49 STREET  
316  
HIALEAH, FL 33012 US

## Current Mailing Address:

6175 W 20 AVE APT 306  
HIALEAH, FL 33012

## New Mailing Address:

850 WEST 49 STREET  
316  
HIALEAH, FL 33012 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NUALLES, CARLOS  
6175 W 20 AVE APT 306  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

NUALLES, CARLOS  
850 WEST 49 STREET  
316  
HIALEAH, FL 33012 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: CARLOS NUALLES

08/07/2006

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: PD ( ) Delete  
Name: NUALLES, CARLOS  
Address: 6175 W 20 AVE APT 306  
City-St-Zip: HIALEAH, FL 33012

Title: VD (X) Delete  
Name: MARRERO, ALEXANDER  
Address: 6175 W 20 AVE APT 306  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NUALLES, CARLOS  
Address: 850 WEST 49 STREET #316  
City-St-Zip: HIALEAH, FL 33012 US

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: CARLOS NUALLES

P/D

08/07/2006

Electronic Signature of Signing Officer or Director

Date