

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000111180

Entity Name: CLAVINA DIAGNOSTICS, INC.

FILED  
Apr 25, 2008  
Secretary of State

**Current Principal Place of Business:**

2180 W STATE RD 434  
SUITE 6184  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

2180 W STATE RD 434  
SUITE 6184  
LONGWOOD, FL 32779

**New Mailing Address:**

FEI Number: 20-3293372      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MASSIAS, DAVID  
2180 W STATE RD 434  
SUITE 6184  
LONGWOOD, FL 32779 US

**Name and Address of New Registered Agent:**

CARTER, DAVID T  
2180 W STATE RD 434  
SUITE 6184  
LONGWOOD, FL 32779 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: DAVID CARTER      04/25/2008  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: YUSEFZADEH, BAHRAM  
Address: 2180 W STATE RD 434 STE 6184  
City-St-Zip: LONGWOOD, FL 32779

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: BAHRAM YUSEFZADEH      D      04/25/2008  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date