

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164606

Entity Name: T & A DIAGNOSTIC CENTER INC.

FILED
Apr 03, 2007
Secretary of State

Current Principal Place of Business:

6555 NW 36 ST., STE. 103
MIAMI, FL 33166

New Principal Place of Business:

6555 NW 36 ST., STE. 103
VERGINIA GARSENS, FL 33166

Current Mailing Address:

6555 NW 36 ST., STE. 103
MIAMI, FL 33166

New Mailing Address:

6555 NW 36 STREET
103
VERGINIA GARDENS, FL 33166

FEI Number: 71-0992813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORZO, JIMMY A SUROS
1179 NW 123RD PLACE
MIAMI, FL 33182 US

Name and Address of New Registered Agent:

SUROS, JIMMY A
6555 NW 36TH STREET
103
VERGINIA GARDENS, FL 33166 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: JIMMY A SUROS

04/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CORZO, JIMMY A SUROS
Address: 1179 NW 123RD PLACE
City-St-Zip: MIAMI, FL 33182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SUROS, JIMMY A
Address: 6555 NW 36 STREET
City-St-Zip: VERGINIA GARDENS, FL 33166

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: JIMMY A. SUROS

P

04/03/2007

Electronic Signature of Signing Officer or Director

Date