

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000064533

FILED
May 05, 2010
Secretary of State

Entity Name: FIRST CLASS MEDICAL DIAGNOSTICS, INC.

Current Principal Place of Business:

3621 MOON BAY CIRCLE
WELLINGTON, FL 33414

New Principal Place of Business:

3933 N. HAVERHILL ROAD
SUITE 115
WEST PALM BEACH, FL 33417 US

Current Mailing Address:

3621 MOON BAY CIRCLE
WELLINGTON, FL 33414

New Mailing Address:

3933 N. HAVERHILL ROAD
SUITE 115
WEST PALM BEACH, FL 33417 US

FEI Number: 20-4867379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERVILLE, PATRICK
3621 MOON BAY CIRCLE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

CASTOR, RENES
3933 N HAVERHILL ROAD
SUITE 115
WEST PALM BEACH, FL 33417 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: RENES CASTOR

05/05/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P,D
Name: CASTOR, RENES MD
Address: 3933 N. HAVERHILL ROAD SUITE 115
City-St-Zip: WEST PALM BEACH, FL 33417 US

I hereby 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 all other like empowered.

SIGNATURE: RENES CASTOR

P,D

05/05/2010

Electronic Signature of Signing Officer or Director

Date