

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000063578

Entity Name: QUANTUM DIAGNOSTICS, INC.

FILED  
Apr 14, 2008  
Secretary of State

## Current Principal Place of Business:

5440 MARINER ST., SUITE 112  
TAMPA, FL 33609

## New Principal Place of Business:

## Current Mailing Address:

5440 MARINER ST., SUITE 112  
TAMPA, FL 33609

## New Mailing Address:

FEI Number: 26-0352726

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SHASTEEN, PHILIP M  
150 2ND AVE. NORTH, SUITE 1100  
ST. PETERSBURG, FL 33701 US

## Name and Address of New Registered Agent:

ARAUJO, RONALD J CEO  
5440 MARINER STREET  
SUITE 112  
TAMPA, FL 33609 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: RONALD ARAUJO

04/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO ( ) Change (X) Addition  
Name: ARAUJO, RONALD J CEO  
Address: 5440 MARINER ST, STE 112  
City-St-Zip: TAMPA, FL 33609 US

Title: PRES ( ) Change (X) Addition  
Name: HANSELMAN, JOHN D PRES  
Address: 5440 MARINER ST, STE 112  
City-St-Zip: TAMPA, FL 33609 US

Title: EXVP ( ) Change (X) Addition  
Name: HARRIS, JAMES W EXVP  
Address: 5440 MARINER ST, STE 112  
City-St-Zip: TAMPA, FL 33609 US

Title: SVP ( ) Change (X) Addition  
Name: BELL, TRACY SVP  
Address: 5440 MARINER ST, STE 112  
City-St-Zip: TAMPA, FL 33609 US

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: NICOLE MIDILI

CTLR

04/14/2008

Electronic Signature of Signing Officer or Director

Date