

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000099022

FILED
Jul 19, 2008
Secretary of State

Entity Name: PRAEDICERE SCIENTIFIC, INC.

Current Principal Place of Business:

1067 NW 96TH AV
PLANTATION, FL 33322 US

New Principal Place of Business:

Current Mailing Address:

1067 NW 96TH AV
PLANTATION, FL 33322 US

New Mailing Address:

FEI Number: 26-0857739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDIGAN, PATRICK
1067 NW 96TH AV
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

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: _____

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: CEO () Delete
Name: HARDIGAN, WILLIAM
Address: 8801-7 GATEHOUSE RD
City-St-Zip: PLANTATION, FL 33324 US

Title: CFOD () Delete
Name: HARDIGAN, PETE
Address: 3215 SILVER CT
City-St-Zip: WIXOM, MI 82901 US

Title: P D () Delete
Name: HARDIGAN, PATRICK
Address: 1067 NW 96TH AV
City-St-Zip: PLANTATION, FL 33322 US

Title: VP D () Delete
Name: COUSINEAU, JENNIFER
Address: 481 WINDING RIVER DRIVE
City-St-Zip: WILLIAMSTON, MI 48895 FL

Title: S D () Delete
Name: HARDIGAN, JANET
Address: 8801-7 GATEHOUSE RD
City-St-Zip: PLANTATION, FL 33324 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PATRICK HARDIGAN

P.D.

07/19/2008

Electronic Signature of Signing Officer or Director

_____ Date