

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000098919

**FILED**  
**Feb 19, 2011**  
**Secretary of State**

**Entity Name:** PATHEOMICS SPECIALISTS PA

**Current Principal Place of Business:**

2067 RIVER REACH DRIVE  
#412  
NAPLES, FL 34104

**New Principal Place of Business:**

5401 SUMMERWIND DRIVE  
204  
NAPLES, FL 34109 US

**Current Mailing Address:**

2067 RIVER REACH DRIVE  
#412  
NAPLES, FL 34104

**New Mailing Address:**

5401 SUMMERWIND DRIVE  
204  
NAPLES, FL 34109 US

**FEI Number:** 27-1438515

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAFEZ, NAIEL  
2067 RIVER REACH DRIVE  
#412  
NAPLES, FL 34104 US

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

HAFEZ, NAIEL  
5401 SUMMERWIND DRIVE  
204  
NAPLES, FL 34109 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: NAIEL HAFEZ

02/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HAFEZ, NAIEL  
Address: 5401 SUMMERWIND DRIVE  
City-St-Zip: NAPLES, FL 34109 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: NAIEL HAFEZ

PRES

02/19/2011

Electronic Signature of Signing Officer or Director

Date