2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000004140

City-St-Zip: HOLLYWOOD, FL 33024

Entity Name: PHOTON MOBILE DIAGNOSTICS, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
14350 SW MIAMI, FL	/ 142 AVENUE 33186 US			
Current N	lailing Addre	ss:	New Mailing Address	s:
14350 SW MIAMI, FL	/ 142 AVENUE 33186 US			
FEI Number	: 65-0424779	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:
10305 NW STE. 111	EAU, RALPH / 41ST ST. FL 33178 US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
Election Ca		nic Signature of Registered Ag ng Trust Fund Contribution ().	ent	Date
		-		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGI	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PDS (CABRERA, SE 17290 SW 192 MIAMI, FL 33	2 ST.	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	ROCHETEAU,) Delete	Title: Name:	
City-St-Zip:	DORAL, FL 33	ST ST., STE. 111	Address: City-St-Zip:	() Change () Addition
	DORAL, FL 33	ST ST., STE. 111 3178) Delete GABRIEL DRIVE		() Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: SERGIO F. CABRERA PRES 04/29/2005