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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** P94000031243 (6)

| Corporation Name  VANGUARD DIAGNOSTICS, INC.  Principal Place of Business  Mailing Address   |   |   |  |   |   |
|--|---|---|--|---|---|
| 1865 NE 163 ST<br>N MIAMI BEACH FL 33162   |   | 1965 NE 163 ST<br>N MIAMI BEACH FL 33162  |  |   |   |
|  |   |   |  | 3. Date Incorporated or Qualified 04/21/1994  | 3a. Date of Last Report 01/18/1995  |
| 2. Princ-pal Pi  | lace of Business  | 2a. Mailing Address<br>26   |  | 4. FEI Number<br>65-0485704   | Applied For Not Applicable  |
| Suite, Apl   | #, etc.   | Suite, Apt #, etc.  |  | 5. Certificate of Status Desired  | \$8.75 Additional Fee Required  |
| City & Stah  | е   | City & State  |  | Election Campaign Financing     Trust Fund Contribution   | \$5.00 May Be   |
| <b>3</b> ]<br>- Zip<br><b>1</b> ]  | Country 25  | 28 Z <sub>I</sub> p   | Country<br>30  | This corporation has liability for in Florida Statutes  | ntangible tax under s 199.032,  |
| 11   | 9. Name and Address of Curr   |   | [30]   | 10. Name and Address of New Re  |   |
| 1865 N   | A, GARY A<br>E 163 ST<br>II BEACH FL 33162  |   | 81 Name<br>82 Street Add<br>83<br>84 City  | iress (P.O. Box Number is Not Acceptabl   | e)   85   Zip Code  |
| II. Pursuant   | to the provisions of Sections 607.05  | 00 and 607 1500 Florida Ctal.   | day the share ground source  |   | FL 189 Zip Oode   |
| or register  | red agent, or both, in the State of Fid<br>ith, and accept the obligations of, Sc   | orida. Such change was authori.<br>ection 607.0505, Florida Statute   | ized by the corporation's boa<br>as.<br>ELAGA  |   | pose of changing its registered onco<br>intment as registered agent. I am   |
| or registe<br>familiar wi<br>BIGNATURE   | red agent, or both, in the State of Flo<br>ith, and accept the obligations of, So<br>Grand A. B. Joseph<br>Stories of representations   | orida. Such change was authoricetion 607.0505, Florida Statute  CARY A. B.  Land the Hangeland N.                                 | ized by the corporation's boals. ELAGA  OTE: Registered Agent signature require  | ard of directors. I hereby accept the appo  | intment as registered agent. I am  2-8-96  DATE   |
| or register<br>familier wi<br>SIGNATURE<br>2.  | red agent, or both, in the State of Figure 1 and accept the obligations of, So Super A B Super Super Item of representations of the State of Figure 2 and the super Item of the State of Figure 2 and the super Item of the State of Figure 2 and the super Item of the State of Figure 2 and the super Item of The State of Figure 2 and | orida. Such change was authori.<br>ection 607.0505, Florida Statute   | ized by the corporation's boals.  ELAGA  OTE Registered Agent signature require  13.   | ard of directors. I hereby accept the appo<br>3<br>ed when reinstating:<br>ADDITIONS/CHANGES TO OFFI  | intment as registered agent. I am  2-8-96  DATE   |
| or register<br>familiar wi<br>SIGNATURE<br>2.<br>HILE<br>AME<br>THEET ADDRESS  | red agent, or both, in the State of Fig. ith, and accept the obligations of, Sc. Sup Sup protein range of regressions  OFFICERS A  PST  BELAGA, GARY A  1865 NE 163RD STREET  | orida, Such change was authoricotion 607.0505, Florida Statute  GARY A. Boundary A. Boundary  AND DIRECTORS                       | ized by the corporation's boards.  ELACA  FOR Registered Agent signature require  13.  1 1 TILLE  12 NAME  13 STREFT ADDRESS   | and of directors. Thereby accept the appoint of directors. Thereby accept the appoint of the directors of the directors of the directors.  ADDITIONS/CHANGES TO OFFICE P/S BELAGA, GARY A. 1865 NE 163RD STREET   | CERS AND DIRECTORS IN 12  Change Addition   |
| or registor familiar with a signature.  12.  THE SAME SAME SAME SAME SAME SAME SAME SAM  | red agent, or both, in the State of Figure 2 and accept the obligations of, So Super protect range of registered OFFICERS A PST BELAGA, GARY A  | orida, Such change was authoricotion 607.0505, Florida Statute  GARY A. Boundary A. Boundary  AND DIRECTORS                       | ized by the corporation's boals.  ELACA  13.  1 1 TITLE 12 NAME 1.3 STREFT ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREFT ADDRESS  | ard of directors. I hereby accept the apposed when renstains:  ADDITIONS/CHANGES TO OFFICE P/S BELAGA, GARY A. 1865 NE 163RD STREET N MIAMI BEACH, FL 33: V/T/D BELAGA, TRACEY A. 1865 NE 163RD STREET  | CERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition   |
| or registor familiar wildinanturre  2.  THE  AME  THE F ADDRESS  THY - ST - ZIP  THE  THE HADDRESS  THY - ST - ZIP  THE  AME  THE TADDRESS  THY - ST - ZIP  THE  THE TADDRESS  THY - ST - ZIP  THE TADDRESS  | red agent, or both, in the State of Fig. ith, and accept the obligations of, Sc. Sup Sup protein range of regressions  OFFICERS A  PST  BELAGA, GARY A  1865 NE 163RD STREET  | orida, Such change was authorication 607.0505, Florida Statute  GARY A. B.  Hawtitk if applicable (NA)  AND DIRECTORS  DELETE     | ized by the corporation's boars.  ELACA  13.  1 1 TITLE  12 NAME  1.3 STREET ADDRESS  1 4 CITY-ST-ZIP  2 1 TITLE  22 NAME  23 STREET ADDRESS  24 CITY-ST-ZIP  3 1 TITLE  32 NAME  33 ST-EET ADDRESS                                    | ard of directors. I hereby accept the appoint of directors. I hereby accept the appoint of the directors of the appoint of the directors.  ADDITIONS/CHANGES TO OFFICE OF THE DIRECTOR OF THE | CERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition   |
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certify that the information injected on this annual report is rule and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: JULIUS BELAGA 3-8-96 (305)940-0051

SIGNATURE AND TRACEY AND BELAGA 3-8-96 (305)940-0051