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PROFIT CORPORATION * ANNUAL REPORT



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

1996

POANNONASO7A (S) DOCUMENT #

1. Corporation Name	
DIATRON DIAGNOSTICS, INC.	

Principal Place of Business Mailing Address 14100 SW 136 ST. PO BOX 330072 MIAMI FL 33186 MIAMI FL 33233 US 3. Date Incorporated or Qualified 3a. Date of Last Report 09/06/1994 04/07/1995 4. f£l Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0519700 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Country $Z_{\rm ID}$ Country Zio 8. This corporation has liability for intangible tax under s. 199.032, Yes No 29 Florida Statutes 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BERNSTEIN, JOEL Street Address (P.O. Box Number is Not Acceptable) A2 9701 BISCAYNE BLVD 83 **MIAMI FL 33138** 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and this if applicable (NOT). Registered Agest signature required when renstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 DELETE Change Addition TITLE 1.1 TITLE MURPHY, W. P JR. NAME 1.2 NAME 10601 SNAPPER CREEK ROAD STREET ADDRESS 13 STREET ADDRESS MIAMI FL 14 CITY- \$1-7IP CITY-ST-ZIP PD TILLE DELETE. 2 1 THILE ☐ Change Addition BOTZ, EDUARD J NAME 2.2 NAME 14100 SW 136 ST STREET ADDRESS 2.3 STHEET ADDRESS MIAMI FL CITY-ST-ZIP 24 CHTY - ST - ZIP DELETE Change Addition 3 1 THILE TILLE DANDLIKER, WALTER B NAME 3.2 NAME 1024 HAVENHURST DRIVE STREET ADDRESS 33 STREET ADDRESS LA JOLLA CA 3.4 CITY - ST - ZIP CITY-S1-ZIP DELETE ☐ Change ☐ Addition TILLE 4 1 TITLE STERNER, JOHN NAME 4.2 NAME 8930 SW 52 AVE. STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 4.4 CITY - ST - ZIP C-TY-ST-ZIP DELETÉ Change Addition 5 1 TIBLE THILE RANA, VICTOR 5.2 NAME NAME 14410 SW 404 ST. 14104 SW 13C MIAMI FL 122 57. 5.3 STREET ADDRESS STREET ADDRESS City-St-ZiP 5.4 CITY - ST-ZIP DELETE ☐ Change ☐ Addition THE 6 1 THLE BERNSTEIN, JOEL NAME 6.2 NAME 9701 BISCAYNE BLVD. STREET ADDRESS 6.3 STREET ADORESS MIAMI FL CITY - ST - ZIP 6.4 CHY - \$1 - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 c attachment with an address.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-96 305-756-3008

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