## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

P94000074083 (4) **DOCUMENT #** Corporation Name

TREASURE COAST DIAGNOSTICS, INC.

APPROVED

1996 MAY -1 PH 12: 53

SECRETARY OF STATE TALLAHASSEE. FLORIDA



Principal Place of	Address								
1766 20TH AVE. VERO BEACH FL 32960			1766 20TH AVE. VERO BEACH FL 32960						
						Date Incorporated or Qualified 10/05/1994	3a. Date of Last Report 05/01/1995		
2. Principal Place	e of Business	2a, Mailing /	Address			4. FEI Number		At	oplied For
1		26				65-0525816		N.	ot Applicable
Suite, Apt. #, etc.		Suite, A	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & S	itate			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip 4	Country 25	Ζφ [29]		Countr 30	y		□ No		99.032,
	g. Name and Address of Cu	rrent Registered Aç	gent		1	10. Name and Address of New R	egistered Ag	ent 	
				81	Name				
EKBÁTA 1766 20				ddress (P.O. Box Number is Not Acceptab	·le)				
VERO B			8	8					
				8	City			<b>85</b> Zip	Code
					<u></u>	poration submits this statement for the pu	<u> </u>		1.1
12. TITLE	D		DELETE	1 1 Teller		ADDITIONS/CHANGES TO OFF		Change	Addition
	ust re-typed or project national respects in OFFICERS	S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFF			
TITLE	-	L	T DELETE					Gnasige	L] Addition
NAMÉ	EKBATANI, JAMES			1.2 NAM					
STREET ADDRESS	1766 20TH AVE.	•		1	EL ADDRESS				
CITY-ST-7/P	VERO BEACH FL 3296		- L DC   F T F	14 GHY	+			Change	☐ Addition
†ifi€		L	DELETE	2 1 1171	- 1			o mang.	
NAME				2.2 NAM					
STREET AC DRESS					ET ADDRESS				
C-1Y - ST - ZIP		· · · · · · · · · · · · · · · · · ·	") DELETE	3 1 Tr*L				Change	Addition
TITLE		L	.) 011111	32 NAM	.		_	· ·	_
NAME					EET*ADDRESS				
STREET ADDRESS				3.4 OII)					
CHY-ST-ZIP			DELETE	4 1 1 1			0015		nddhio
TILE		L		4.2 NAM	1		796df		
NAME					EL ADDRESS	****2	00.00	****	'00.0U
STREET ACIDRESS				i i					
CITY+S1-ZIP			DELETE	5 1 III i	ST 21P			Change	Addition
TITLE		L		5 2 NAN				-	
NAME					ET ADDRESS				
STREET ADDRESS					!				
CITY-ST-ZIP			DELETE	5 4 C-1Y	-ST - 71P			Change	Additio
TITLE		L					<u> </u>		
NAME				6.2 NAN	-				
STREET ADDRESS					EL ADDRESS		Secs		a( .
CITY - ST - ZIF				6 4 CII1	- S1 - ZIP		2567		19

14. Ido hereby certify that the information supplied with this filing is vountarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4). 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 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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 23, 96 Baptis Prince