FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 10: 16

DOCUMENT # **P94000085462 (7)**

1. Corporation Name
JMV DIAGNOSTIC CORP.

Principal Place of Business
1000 PONCE DE LEON, 317
MIAMI FL 33134

Mailing Address
1000 PONCE DE LEON, 317
MIAMI FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/23/1994
3a. Date of Last Report:

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: Applied For ☐ Not Applicable ☒
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
UCC FILING & SEARCH SERVICES, INC.
526 E PARK AVE, 200
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
81 Name: Ray Rodriguez
82 Street Address (P.O. Box Number is Not Acceptable): 3191 Coral Way #800
83
84 City: Miami FL 85 Zip Code: 33145

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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: (signature of new or resigning registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning) DATE: 2-1-95

12. OFFICERS AND DIRECTORS	
TITLE	DP
NAME	VELEZ, JESUS J
STREET ADDRESS	1100 SW 74TH CT
CITY ST ZIP	MIAMI FL 33144
TITLE	DV
NAME	VELEZ, JESUS
STREET ADDRESS	1100 SW 74TH CT
CITY ST ZIP	MIAMI FL 33144
TITLE	DS
NAME	VELEZ, MARIA
STREET ADDRESS	1100 SW 74TH CT
CITY ST ZIP	MIAMI FL 33144
TITLE	DT
NAME	VELEZ, MAYRA
STREET ADDRESS	1100 SW 74TH CT
CITY ST ZIP	MIAMI FL 33144
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 1 TITLE	☐ Change ☐ Addition
1 2 NAME	
1 3 STREET ADDRESS	
1 4 CITY ST ZIP	
2 1 TITLE	☐ Change ☐ Addition
2 2 NAME	
2 3 STREET ADDRESS	
2 4 CITY ST ZIP	
3 1 TITLE	☐ Change ☐ Addition
3 2 NAME	
3 3 STREET ADDRESS	
3 4 CITY ST ZIP	
4 1 TITLE	☐ Change ☐ Addition
4 2 NAME	
4 3 STREET ADDRESS	
4 4 CITY ST ZIP	
5 1 TITLE	☐ Change ☐ Addition
5 2 NAME	
5 3 STREET ADDRESS	
5 4 CITY ST ZIP	
6 1 TITLE	☐ Change ☐ Addition
6 2 NAME	
6 3 STREET ADDRESS	
6 4 CITY ST 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 the 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: Jesus J. Velez - President 1-30-95 305-374-1368
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0107655 CP