

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000052502 (8)**
1. Corporation Name

UNIVERSAL DIAGNOSTIC & EQUIPMENT SERVICE, INC.



Principal Place of Business: **409 S.W. 29TH AVE MIAMI FL 33135**
Mailing Address: **409 S.W. 29TH AVE MIAMI FL 33135**

3. Date incorporated or Qualified: **07/07/1995**
3a. Date of Last Report: **07/07/1995**
4. FEI Number: **65-0592597**
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

2. Principal Place of Business: **7811 CORAL WAY SUITE 131 MIAMI, FL. 33155**
2a. Mailing Address: **7811 CORAL WAY SUITE 131 MIAMI, FL. 33155**

9. Name and Address of Current Registered Agent

**TARRAN, CARLOS E
409 S.W. 29TH AVE
MIAMI FL 33135**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code

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 typed or printed name of registered agent and then appropriate (If Registered Agent's signature required, attach separate page)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: PD	<input type="checkbox"/> DELETE	11 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: TARRAN, CARLOS E		12 NAME:
STREET ADDRESS: 409 S.W. 29TH AVE		13 STREET ADDRESS:
CITY-ST-ZIP: MIAMI FL 33135		14 CITY-ST-ZIP:
TITLE: VD	<input type="checkbox"/> DELETE	21 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: DELGADO, LAURO T		22 NAME:
STREET ADDRESS: 10325 N.W. 30TH CT		23 STREET ADDRESS:
CITY-ST-ZIP: MIAMI FL 33147		24 CITY-ST-ZIP:
TITLE: STD	<input type="checkbox"/> DELETE	31 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: PENALVER, LUISA M		32 NAME:
STREET ADDRESS: 10410 N.W. 131 ST		33 STREET ADDRESS:
CITY-ST-ZIP: HIALEAH GARDENS FL 33016		34 CITY-ST-ZIP:
TITLE:	<input type="checkbox"/> DELETE	41 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		42 NAME:
STREET ADDRESS:		43 STREET ADDRESS:
CITY-ST-ZIP:		44 CITY-ST-ZIP:
TITLE:	<input type="checkbox"/> DELETE	51 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		52 NAME:
STREET ADDRESS:		53 STREET ADDRESS:
CITY-ST-ZIP:		54 CITY-ST-ZIP:
TITLE:	<input type="checkbox"/> DELETE	61 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		62 NAME:
STREET ADDRESS:		63 STREET ADDRESS:
CITY-ST-ZIP:		64 CITY-ST-ZIP:

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***225.00**

07-08-96

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, 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARLOS TARRAN

06/27/96

CR2E034 (3/96)