## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

1997

DOCUMENT # 1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**  APPROVED AND FILED

1997 JUL 23 MI 9: 04

SECRETARY OF STATE TALLAHASSEE, FLORIDA

NATIO	NAL DIAGNOSTICS GROUP	OF MIAMI, INC.				
Principal Plac	ce of Business	Mailing Address				
7400 NO. KENDALL DRIVE #103 7400 NO. KENDALL DRIV			E #102			
MIAMI FL 33156 MIAMI FL 33156			#103	w		
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	3a. Date of Last Report
O Drinning (	None of Divisional	A. 11-77- A.M.			09/10/1996	
<del>-</del>		2a. Mailing Address	<u> </u>		4. FEI Number 65-069 7765	Applied For
		Suite Ant # etc	Suite, Apt. #, etc.		@\$ 067 1763	Not Applicable  \$8.75 Additional
22		<del></del>	<b>-</b>		<ol><li>Certificate of Status Desired</li></ol>	Fee Required
City & State		City & State	** <del>***********************************</del>		6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid	d the current year Intangible
24	25	29	30		Personal Property Tax due June	30. Yes No
	9. Name and Address of Curre	nt Registered Agent		Т	10. Name and Address of New Reg	listered Agent
	PRRIS, DAVID B		81	Name		
712 U.S. HIGHWAY ONE			82	Street Ac	idress (P.O. Box um r sNo Acceptabl	<b>512046</b>
NORTH PALM BEACH FL 33408			-		<u>-U7/29/9</u>	<u>/U1100U12</u>
			83	1	***165	.00 ****165.00
			84	City		85 Zip Code
11 Pursuant	to the provisions of Sections 607.050	02 and 607 1509. Florida Statuto	or the ehes	n namad a	proportion submits this statement for the	FL °S Zip code
office or	registered agent, or both, in the State	of Florida. Such change was a	uthorized b	y the corpo	orporation submits this statement for the paration's board of directors. I hereby accept	urpose of changing its registered   t the appointment as registered
	am familiar with, and accept the oblig	pations of, Section 607,0505, Flor	rida Statute	\$.		
SIGNATURE	Signature, typed or printed name of registered ag	and fitte if poplicable (NOTE	- Boolmorad An	ant cionature ro	quired when reinstating)	DATE
12.		ID DIRECTORS	13.	on alg. Riche Tex	ADDITIONS/CHANGES TO OFFICE	
TITLE	PRESIDENT	☐ DELETE	1.1 TITLE			Change Addition
NAME	ROBERT ROSENFELD		1.2 NAME			<del>-</del>
STREET ADDRESS	7.0		1.3 STREET ADDRESS			
CITY-ST-ZIP	WELLINGTON, FL 33414		1.4 CITY - ST - ZIP			
TITLE	SOL/MAS.	DELETE	2.1 TITLE			Change Addition
NAME	MARTH GASSUBGES		2.2 NAME			
STREET ADDRESS	RESS 576 CANCINGS ROAD		2.3 STREET ADDRESS			
CITY-ST-ZIP	DIGNAH MAKANIR BEACH, FL 82937		2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	ADORESS		
CITY-ST-ZIP			3.4. CITY -	ST-ZIP		
TITLE .			4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			4.4 CITY-3	ST-ZIP		
TITLE		☐ DETEIF	51 TITLE			Change Addition
NAME CERCET ADMOCCO			5.2 NAME			
STREET ADDRESS			5.3 STREET			
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - 9 6.1 TITLE	SI-ZIP		Change \ Addition
NAME		- Pertie	6.2 NAME			C ousuids NC woodoll
STREET ADORESS			6.3 STREET	ADDRESS		Win219 '
CITY OF TIP			0.3 3 MEE	WDDUC99		71'V'

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.

pg2g2

## NATIONAL DIAGNOSTICS GROUP OF MIAMI, INC.

7400 N. KENDALL DRIVE SUITE 103 MIAMI, FL. 33156

Phone 561-753-3124 Fax 561-753-7960

JULY 17, 1997

## WHOM IT MAY CONCERN,

TODAY, I RECEIVED A FILING NOTICE SECOND REQUEST FOR FILING FEES FOR 1997. I TOOK CARE OF THIS IN APRIL. IN JUNE I RECEIVED A NOTICE STATING THAT MY FEI # AND LIST OF OFFICERS FOR CORPORATION WERE MISSING. I FILLED OUT THE APPROPRIATE INFORMATION AND IMMEDIATELY RETURNED THE FORM WITH THE CHECK FOR \$165.00. WHEN I CALLED YOUR OFFICE TODAY I FOUND OUT THAT YOU HAVE NEVE RECEIVED THE APPLICATION BACK. ENCLOSED IS A PHOTOCOPY OF THE ORIGINAL CHECK AND APPLICATION THAT WAS MAILED BACK TO YOU. I AM ALSO ENCLOSING A NEW APPLICATION AND A NEW CHECK FOR THE MISSING ONES.

IF YOU HAVE ANY QUESTIONS REGARDING THIS, PLEASE CONTACT ME. I WOULD ALSO APPRECIATE IT IF YOU COULD MAKE A NOTE THAT NATIONAL DIAGNOSTICS GOUP OF MIAMI, INC. IS NO LONGER IN BUSINESS.

SINCERLY.

ROBERT ROSENFELD

**PRESIDENT**