

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 08, 2002 8:00 am
Secretary of State

08-08-2002 90093 003 ***150.00

DOCUMENT # P96000096275

1. Entity Name

DIAGNOSTIC ASSOCIATES OF FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

973497

2. Principal Place of Business
1560 SAWGRASS CORP. PKWY. P.O. BOX 268735

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4TH FLOOR

City & State

City & State

SUNRISE, FL

WESTON, FL

4. FEI Number

65-0709843

Applied For

Not Applicable

Zip

Country

Zip

Country

33323

USA

33326

USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name

FERNANDO ANDRES BARBERENA

Street Address (P.O. Box Number is Not Acceptable)

530 PENTA COURT

City

WESTON

FL

Zip Code

33327

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

08/05/2002

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPS
FERNANDO ANDRES BARBERENA
530 PENTA COURT
WESTON, FL 33327

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DVT
MARIA ALEJANDRA BARBERENA
530 PENTA COURT
WESTON, FL 33327

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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13. I 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

FERNANDO A. BARBERENA 8/05/2002 (954) 331-8111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment
9/8/02

Diagnostic Associates of Florida

1560 Sawgrass Corporate Parkway
Sunrise, FL 33323

(954) 331-8111
Fax: (954) 331-4601

August 5th, 2002

Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32314

RE: Uniform Business Report (UBR) Year 2002
Corporation #: P96000096275

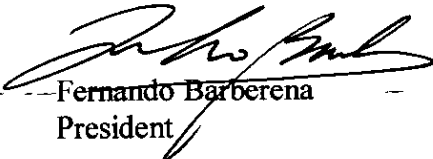
Dear Sirs:

Due to the fact that we have moved our business to a new location this year, the 2002 Uniform Business Reports, first and second notices, were not received. This is in spite of the fact that a forwarding notice was given to the Postal Service.

This is the first time that we have a late filing of our UBR; all previous filings have been made timely. We ask you to please waive the late charges in this instance due to these particular circumstances and our good payment history.

Enclosed is the UBR for year 2002 along with our check for \$ 150.00. Thank you for your understanding and cooperation.

Sincerely,


Fernando Barberena
President