

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
May 08 1998 8:00am
Secretary of State

DOCUMENT # P97000006495 (0)

1. Corporation Name

INTERNATIONAL BIOMEDICAL DIAGNOSTICS, INC.



Principal Place of Business

Mailing Address

10658 SOUTHWEST 76TH TERRACE
MIAMI FL 33171

10658 SOUTHWEST 76TH TERRACE
MIAMI FL 33171

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/22/1997

4. FEI Number

65 0723453

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

2. Principal Place of Business

33015

21 7010 N.W. 186 ST #507 MIAMI, FL

Suite, Apt. #, etc.

22 #507

City & State

23 MIAMI, FL

Zip

24 33015

Country

25 USA

2a. Mailing Address

26 7010 N.W. 186 TH ST.

Suite, Apt. #, etc.

27 #507

City & State

28 MIAMI, FL

Zip

29 33015

Country

30 USA

9. Name and Address of Current Registered Agent

KORNBLUM, ROBERT
10658 SOUTHWEST 76TH TERRACE
MIAMI FL 33171

10. Name and Address of New Registered Agent

81 Name

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

7010 N.W. 186 ST #507

83

84 City

MIAMI

FL

85 Zip Code

33015

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME KORNBLUM, ROBERT
STREET ADDRESS 10658 SOUTHWEST 76TH TERRACE
CITY-ST-ZIP MIAMI FL 33171

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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

7010 N.W. 186 TH ST. #507
MIAMI, FL 33015

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 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.

SIGNATURE:

Robert Kornblum

4-30-98

305-364-9684

CR2E034 (10/97)