

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2002 8:00 am
Secretary of State

0257398 AV

DOCUMENT # P97000064171

1. Entity Name
R.B. DIAGNOSTICS, INC.

02-14-2002 90011 039 ***150.00

Principal Place of Business
18260 N.E. 19TH AVENUE
STE 204
N. MIAMI BEACH FL 33162

Mailing Address
18260 N.E. 19TH AVENUE
STE 204
N. MIAMI BEACH FL 33162



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6067 Hollywood Blvd.

3. Mailing Address
6067 Hollywood Blvd

Suite, Apt. #, etc.
3rd Floor

Suite, Apt. #, etc.
3rd Floor

City & State
Hollywood, FL

City & State
Hollywood, FL

4. FEI Number
65-0779418

Applied For
 Not Applicable

Zip
33024

Country
Broward

Zip
33024

Country
Broward

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BORAH, RICHARD
7605 NORTHWEST 42ND PLACE SUITE B207
SUNRISE FL 33351

Name

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

City

FL

Zip Code

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)

DATE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P BORAH, RICHARD
7605 NORTHWEST 42ND PLACE SUITE B207
SUNRISE FL 33151

TITLE
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☐ Change ☐ Addition

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☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Borah

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-02

Date

954-981-9777

Daytime Phone #

CR2E034 (9/01)