

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000067817

FILED
Apr 30, 2003
Secretary of State

Entity Name: PHYSICIANS DIAGNOSTIC SYSTEMS, INC.

Current Principal Place of Business:

1757 CORAL WAY
MIAMI, FL 33145 US

New Principal Place of Business:

Current Mailing Address:

1757 CORAL WAY
MIAMI, FL 33145 US

New Mailing Address:

FEI Number: 65-0772181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, MARK M
ONE BISCAYNE PLACE, SUITE 403
11098 BISCAYNE BLVD
MIAMI, FL 33161

Name and Address of New Registered Agent:

SPIEGEL & UTERA
1840 CORAL WAY
MIAMI, FL 33145

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: NATALIA UTERA

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEISS, RACHELLE
Address: 832 MAJORCA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: EVP () Delete
Name: PRESS, JACK A
Address: 530 MELALEUCA LN
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RACHELLE WEISS

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date