2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000043219

FILED May 01, 2002 8:00 AM Secretary of State

Entity Name: JESUS E. VILORIA, M.D./PATHOLOGY LABORATORY (VIL-PATH), INC.

30 ALTO	rincipal Place o	of Business:	New Principal Place	of Business:
	ACH, FL 33139			
urrent Mailing Address:		New Mailing Address:		
	N ROAD ACH, FL 33139			
El Number	: 65-0834976	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of Cu	rrent Registered Agent:	Name and Address of	of New Registered Agent:
30 ALTÓ	JESUS E N RD H, FL 33139			
	named entity su e of Florida.	bmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
the State	e of Florida.	bmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
the State	e of Florida. RE:	bmits this statement for the positions of the positions of Registered Ag		d office or registered agent, or both, Date
the State GNATU	e of Florida. RE: Electronic ation is eligible to s	Signature of Registered Ag		
the State IGNATUI his corpor ection Car	e of Florida. RE: Electronic ation is eligible to s	Signature of Registered Agatisfy its Intangible Tax filing records	ent quirement and elects to do so (X).	
the State GNATUI is corporection Car	e of Florida. RE: Electronic ation is eligible to s mpaign Financing S AND DIRECT	Signature of Registered Agestisfy its Intangible Tax filing records Fund Contribution (). ORS: Delete E MD DR	ent quirement and elects to do so (X).	Date
the State GNATUI dis corporection Car FFICER le: ume: dress:	e of Florida. RE: Electronic ation is eligible to s mpaign Financing S AND DIRECT DP () E VILORIA, JESUS 16734 DIAMOND WESTON, FL 33	e Signature of Registered Agratisfy its Intangible Tax filing records frust Fund Contribution (). ORS: Delete E MD DR 331 Delete C DR	ent quirement and elects to do so (X). ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: JESUS E VILORIA DP 05/01/2002