COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). **PROFIT** CORPORATION ANNUAL REPORT 00 MAR 24 AM 9: 48 DOCUMENT #

1. Corporation Name SECRETARY OF STATE J. L DIAG-NOSTIG CENTER incipal Place of Business Mailing Address 7511 NW 73 ST \$103 DO NOT WRITE IN THIS SPACE Miami FL 33166 3. Date incorporated or Quatified 07-09-1998 Applied For FEI Number 65-0850459 Mailing Address 73 ST Principal Place of Business 75 // NW 73 ST Not Applicable \$8.75 Additional Suite. Apt #, etc. # 103 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required #103 City & State \$5.00 May Be City & State 6. Election Campaign Financing 11 Am 1 FL 33/66 Added to Fees Trust Fund Contribution 28 8. This corporation owes the current year MIAMI DADE Y No Yes 25 MIAMI DADE 29 33166 Intangible Personal Property. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name JOSE F. Rubio Street Address (P.O. Box Number is Not Acceptable) 82 7511 NW 73:ST \$103 83 MIAMI FL 33166 85 Zip Code 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 uniporation'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 DATE NOTE Regulate Liveral Alter temphology Signature, typed or printed name of registered agent and title if applicable (66/9)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. ____ Change ____ Audition Hides ___ DELETE JOSE F. RUDIO 7511 NW 73 ST \$ 103 MIAMI FL 33166 12 NAME 135TRELTADDRÉSS 200003196022 -04/04/00--01102--005 14 čří 1-51 Zir 11 - 5 I-21F 2 Hilai DELETE 22 NAME SHE 2.5 STREET ADDRESS _ LABORESS 003196022-04/04/00--01 102-- (ID Control 3 1 7/416 DELETE ****150.00 ****150.00 12 locale : 115 รีรี STREET ALGRESS .i.acoae55 SHIGHTNISH ME O OST-ZIP an Isrufi Change Aggition DELETE 4.20/3/4 4 G STREET ADDRESS 1 ALORESS 4.4 CHY-SF-ZP 000ST-2iP 5.1 To 51 F Addition = ___ DELETE 5.2 BAME 5 3 STREET ADDINESS ··· ADDRESS 54 C.1 (-31-21c) IT + ST-ZIP __ Change 6 1 THEE . 5 DELETE 62 NAME .; .;; u 3 51R/R 1 -CONESS ·····T AUDRESS 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

Hg. 2 of 2. Attachment

J & L Diagnostic Center Corp. 7511 NW 73 St. # 103 Miami Fl 33166

March 18, 2000

Annual Report Filings
Division of Corporations
P.O.Box 6327
Tallahassee Fl 32314

Dear Officer:

Pursuant to our telephone conversation of last week, I am enclosing an annual report for our corporation for the years 1999 and 2000 and a payment of \$150.00 for each of these years.

I respectfully request you accept the late 1999 filing, as we moved since being established in late 1998 and we were not aware of the Department filing procedures.

Yours Truly

si Fas. Aul.

President