

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000061689

1. Entity Name

CARDIOPULMONARY DIAGNOSTICS SPECIALTIES CORP.

**FILED**  
**Mar 21, 2000 8:00 am**  
**Secretary of State**

03-21-2000 90061 029 \*\*\*150.00

Principal Place of Business

Mailing Address

7527 WEST 24 AVENUE  
HIALEAH FL 33016

7527 WEST 24 AVENUE  
HIALEAH FL 33016-6515

2. Principal Place of Business

3. Mailing Address

7525 W 24 AVE

7525 W 24 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hialeah, FL

City & State

Hialeah, FL

4. FEI Number

65-0852279

Applied For

Not Applicable

Zip

33016

Country

USA

Zip

33016

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CASTELLANOS, JOSE  
13020 SW 51 STREET  
MIRAMAR FL 33027

7. Name and Address of New Registered Agent

Name

Same

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 JOSE CASTELLANOS

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

3/16/00

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, 2000 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

TITLE ☐ Delete  
NAME SD  
STREET ADDRESS CASTELLANOS, JOSE  
CITY-ST-ZIP 13020 SW 51 ST  
MIRAMAR FL 33027

TITLE ☐ Delete  
NAME PD  
STREET ADDRESS CASTELLANOS, AARON  
CITY-ST-ZIP 13020 SW 51 ST  
MIRAMAR FL 33027

TITLE ☐ Delete  
NAME D  
STREET ADDRESS CASTELLANOS, MARIA  
CITY-ST-ZIP 13020 SW 51 ST  
MIRAMAR FL 33027

TITLE ☒ Delete  
NAME D  
STREET ADDRESS CASTELLANOS, ERIC  
CITY-ST-ZIP 13020 SW 51 ST  
MIRAMAR FL 33027

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS CASTELLANOS, JASON  
CITY-ST-ZIP 13020 SW 51 ST  
MIRAMAR, FL 33027

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/00

Date

305-364-0772

Daytime Phone #

CR2E034 (9/99)