2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an ad

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 16, 2005 8:00 am **Secretary of State** DOCUMENT # P98000075672 02-16-2005 90020 028 ***150.00 1. Entity Name BIOTECH DIAGNOSTIC SERVICES, CORP. Principal Place of Business Mailing Address 40010303 15715 S. DIXIE HWY. 15715 S. DIXIE HWY. STE. 317 STE. 317 MIAMI, FL 33157 MIAMJ, FL 33157 CR2E034 (10/03) 01032005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0860191 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOPEZ, RODOLFO DO NOT WRITE 15715 S. DIXIE HWY. STE, 317 IN THIS SPACE MIAMI, FL 33157 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PDVS** TITLE LOPEZ, RODOLFO NAME STREET ADDRESS 15715 S. DIXIE HWY., STE. 317 CITY-ST-ZIP MIAMI, FL 33157 IIILE LOPEZ, RODOLFO NAME 15715 S. DIXIE HWY., STE. 317 STREET ADDRESS MIAMI, FL 33157 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP -TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 fustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11.

FILED