## 2000 UNIFORM BUSINESS REPORT (UBR) 7/13/00-90020-030-\$61,25-\$61,25 DOCUMENT # P99000047095 FILEU ADVANCED DIAGNOSTICS, INC. BREIARY OF STAIL FIGUR OF CORPORATIONS Principal Place of Business Mailing Address 00 OCT -2 AM 10: 08 1444 A SKEES RD. 1444 A SKEES RD. WEST PALM BEACH FL 33411 WEST PALM BEACH FL 33411 2. Principal Place of Business 3. Mailing Address Suite, Act. #, etc. Suite. Act. #. etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent. Name LUCAK, SUZANNE M Street Address (P.O. Box Number is Not Acceptable) 1444 A SKEES RD. WEST PALM BEACH FL 33411 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Delete TITLE LUCAK, SUZANNE M NAME NAME 1444 A SKEES RD. 400003423404---10/12/00--01081--013 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33411 CITY-ST-ZIP TITLE ☐ Defeta TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-70 TITLE Defete TITLE - Change - Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of prustee empowered to execute this report excluding 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.

TITLE

MAKE

STREET ADDRESS CITY-ST-ZIP

Oelete

56

(561)697-9841 7/6/00

☐ Change

Addition

SIGNATURE

TITLE

NAME

STREET ADDRESS

## Advanced Auto Diagnostics Inc.

fftachment Off pagounu47095 DUGG772

1444A Skees Rd. West Palm Beach Fl. 33411

U.S.A

Phone 697-9841 Fax 697-9635

Јшу 06, 2000

Division of Corporations Uniform Business Report Filings Brenda P O Box 1500 Tallahassee FL 32302-1500

## Dear Brenda:

I had spoken with you on July 6, 2000 about not receiving my first 2000 Uniform Business Report Form and you had said to send a letter with my filing and that you would be able to abate the late fee. I have enclosed the completed form and a check for \$61.25.

Thank you for taking care of this matter.

Sincerety

Suzanne Lucak

ı