

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000087471

1. Entity Name
NEUROSCAN DIAGNOSTIC, INC.

FILED
Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90238 018 ***150.00

Principal Place of Business
5901 NW 151 ST. SUITE 222
MIAMI LAKES FL 33014

Mailing Address
5901 NW 151 ST. SUITE 222
MIAMI LAKES FL 33014



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5901 NW 151st
Suite, Apt. #, etc.
222

3. Mailing Address
5901 NW 151st
Suite, Apt. #, etc.
222

City & State
MIAMI LAKES, FL
Zip
33014
Country
USA

City & State
MIAMI LAKES, FL
Zip
33014
Country
USA

4. FEE Number **65-0957034** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEL VALLE, MARIO G
13250 SW 71 ST
MIAMI FL 33183

Name
MARIO G DEL VALLE.
Street Address (P.O. Box Number is Not Acceptable)
5901 NW 151st #222
City
MIAMI LAKES FL Zip Code
33014

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 **MARIO G. DEL VALLE**

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

(NOTE: Registered Agent signature required when re-registering)

04/16/2001
DATE

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, 2001 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 **D** ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
DEL VALLE, MARIO G
1250 SW 71ST ST.
MIAMI FL 33183

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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
STREET ADDRESS
CITY-ST-ZIP
MARIO G. DEL VALLE.
5901 NW 151st #222
MIAMI LAKES, FL 33014

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

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

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

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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

04/16/2001 (305) 826-2070
Date Daytime Phone #

CR2E034 (10/00)