

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S06153

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Entity Name:** P & V MEDICAL DIAGNOSTIC, INC.

**Current Principal Place of Business:**

14833 S.W. 80 STREET  
APT 101  
MIAMI, FL 331931541 US

**New Principal Place of Business:**

**Current Mailing Address:**

14833 S.W. 80 STREET  
APT 101  
MIAMI, FL 331931541 US

**New Mailing Address:**

**FEI Number:** 65-0227975      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VALCARCEL, GISELA  
14833 SW 80 ST  
APT 101  
MIAMI, FL 33193 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DIR.  
Name: VALCARCEL, GISELA  
Address: 14833 SW 80 ST #101  
City-St-Zip: MIAMI, FL 331931541

Title: MGR.  
Name: VALCARCEL, ALEX  
Address: 14833 SW 80 ST #101  
City-St-Zip: MIAMI, FL 331931541

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GISELA VALCARCEL

DIR.

04/15/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date