FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

1998					DIVISION OF CORPORATIONS			NS	Secretary of State
l .	OCUME Corporation Name				(6)		•••		
	CENTURY	DIAGN	OSTICS, INC	•					
Princ	cipal Place of B	usiness		Mailing	Address		-		
1814 NE MIAMI GARDEN DRIVE SUITE 406 N. MIAMI BEACH FL 33179				SUITE	1814 NE MIAMI GARDEN DRIVE SUITE 406 N. MIAMI BEACH FL 33179				DO NOT WRITE IN THIS SPACE
US				U\$	U\$				3. Date Incorporated or Qualified
2 P	rincipal Place o	f Busino		2a Mai	28. Mailing Address				05/06/1991 4. FEI Number Applied For
21	Till Copy and Ti			26)·····				65-0257017 Not Applicable
22 22	uite, Apt #, etc			Suit 27					5. Cortificate of Status Desired Section Secti
23	City & State			28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
24	ιþ	Country 7tp 25 29 30		Cour	ntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	9.		nd Address of Cu		l Agent	30			10. Name and Address of New Registered Agent
	COZZA	JOSEP	H				81	Namo	
ANA SIE SHARM OSERENO DENIE							Street Add	ress (P.O. Box Number is Not Acceptable)	
	SUITE 406								
N. MIAMI BEACH FL 33179							83		
	8							City	FL 85 7ip Code
	Pursuant to the office or registe agent. I am fam	provision red agen hiliar with	ns of Sections 607 at, or both, in the S , and accept the c	.0502 and 607.15 state of Florida. Si bligations of, Sec	08, Florida Statu uch change was stion 607.0505, F	utes, the ab authorized Torida Statu	DOVE- by the states.	named corp he corporal	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
	Signalu	ro, lyped or	profes from of registers				Agenl	s-gnature raqui	fred where reinstating) DATE
12.	0		OFFICERS	AND DIRECTOR	S DELETE	13. 1.1 101			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	-	D77A .	IOSEPH		_ Gitti	1.2 NA			
			MIAMI 406					DURESS	
CITY-	ST-ZIP N.	MIAM	BEACH FL			1.4 CIT	Y · ST-	ZIP	
TITLE					DELFTE	2 1 7(7	LF		Ctrange Addition
NAME						2.2 NA	ME	1	
	T ADDRESS							DDRESS	
CITY-:	ST-Z)P				DELETE	2 4 CH 3.1 TH		· ZIP	Change Addition
NAME					occur	3.2 NAI		Ì	C outlings C Notation
	T ADDRESS							DDRESS	
	SI-7IP					3.4 CIT			
TITLE					DELETE	4.1 1/11			Change Addition
NAME						4. 2 NA	Mŧ		
STREET	1 ADDRESS					4 3 \$16	KEET AC	DDRESS	
	ST-ZIP				DELETE	4.4 017		ZIP	/ I out. I war
TITLE					DETEAL	51 TH		1	Change Addition
NAME	T ADDRESS					5.2 NAN		DORESS	// 1/199 </td
	ST-ZIP					5.4 CIT		- 1	10 70 7
TITLE	U1 - 211				DELETE	6.1 1111			☐ Change ☐ Addition
NAME						6.2 NA	ME		400002408154
STREET	T ADDRESS					6.3 STR	REET AF	DDRESS	-01/22/9801016010 ***150.00
	1.1								を重要するほより (

14. Thereby 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 annual report or suppliental annual 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 12 or Block 13 if changed, or on an address.

SIGNATURE:

FILED

Jan 21 1998 8:00am