FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S88573 (8)

1. Corporation Name

MEDICAL DIAGNOSTICS LABORATORIES, INC.

Principal Place of Business	Mailing Address
PO BOX 3507 DELAND FL 32723-3507 US	PO BOX 3507 DELAND FL 32723-3507 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/17/1991
3a. Date of Last Report: 05/19/1994

2. Principal Place of Business	2a. Mailing Address
21 901 N. Stone St.	26 901 N. Stone St.
Suite, Apt. #, etc. 22 Suite A	Suite, Apt. #, etc. 27 Suite A
City & State 23 Deland, Fl	City & State 28 Deland, Fl
Zip 32720 Country 24 [illegible] 25 Volusia	Zip 32720 Country 29 32720 30 Volusia

4. FEI Number: 59-3091843 — Applied For ☐ Not Applicable ☐

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

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CHRITTON, CHARLES P. 5300 SOUTH FLORIDA AVENUE LAKELAND FL 33803	81 Name: John D. Belden 82 Street Address (P.O. Box Number is Not Acceptable): 2924 Grasslands Dr. 83 84 City: Lakeland FL 85 Zip Code: 33803

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: John D. Belden — John D. Belden President — DATE: 4-28-95
(Signature of one (1) of the following: New Registered Agent and the President — NOTE: Registered Agent's signature required if agent changed)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	VD	☒ Change ☐ Addition
NAME	MONACO, FRANCIS P	12 NAME	MONACO, Francis P	
STREET ADDRESS	2370 INTERNATIONAL SPEED	13 STREET ADDRESS	901 N. Stone St.	
CITY ST ZIP	DELAND FL	14 CITY ST ZIP	DeLand FL 32720	
TITLE	STD	21 TITLE		☒ Change ☐ Addition
NAME	BOWNE, DOUGLAS N	22 NAME	Resigned	
STREET ADDRESS	1720 SO FLORIDA AVE	23 STREET ADDRESS		
CITY ST ZIP	LAKELAND FL	24 CITY ST ZIP		
TITLE	DP	31 TITLE	DP	☒ Change ☐ Addition
NAME	BELDEN, JOHN	32 NAME	Belden, John	
STREET ADDRESS	1720 S FLORIDA AVE	33 STREET ADDRESS	901 N. Stone St.	
CITY ST ZIP	LAKELAND FL	34 CITY ST ZIP	Lakeland, Fl. 32720	
TITLE	VD	41 TITLE	STD	☒ Change ☐ Addition
NAME	BELDEN, DOTTIE S	42 NAME	Belden, Dottie S.	
STREET ADDRESS	1720 S FLORIDA AVE	43 STREET ADDRESS	901 North Stone St.	
CITY ST ZIP	LAKELAND FL	44 CITY ST ZIP	Lakeland, Fl 32720	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 supplemental 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 attachment with an address.

SIGNATURE: John D. Belden — John D. Belden — 4-28-95 — 904-738-0023
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0414249 FP