2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # May 11, 2000 8:00 am 1. Entity Name **Secretary of State** Insight Medical Imaging, Inc. 05-11-2000 90278 042 ***158.75 Principal Place of Business Mailing Address 2025 Indian Rocks Road P.O. Box 756 Largo, Florida 34644 Lagro, FL 33799-0756 950374 2. Principal Place of Business Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite Apt. #. etc. 4. FEI Number Applied For City & State City & State 59-2129932 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Jeorge Eric Taylor Julius J. Zschau Box Number is Not Acceptable) Kennedy Blvd., Suite 2700 911 Chesnut Clearwater, Florida 34616 **33602** Tampa its registered office or registered agent, or both, in the State of Florida The above named Jeorge Eric Taylor SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150:00 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 MAY 1, 2000 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 11. 12. Addition ☐ Change President, Director ☐ Delete TITLE TITLE NAME NAME J. Eric Taylor, Jr. STREET ADDRESS STREET ADDRESS 1195 Clays Trail CITY-ST-ZIP CITY-ST-ZIP 01dsmar, FL 34677 ☐ Change ☐ Addition Secretary, Tresurer, Director Delete Susan Belloc Taylor TITLE. NAME 1195 Clays Trail STREET ADDRESS STREET ADDRESS Oldsmar, FL CITY-ST-ZIP 34677 CITY-ST-ZIP ☐ Change Addition Director ☐ Delete TITLE TITLE NAME NAME J. Eric Taylor STREET ADDRESS STREET ADDRESS 101 E. Kennedy Blvd. Ste. 2700 Oldsmar, FL 34677 CITY-ST-ZIP CITY-ST-ZIP Oldsmar, FL ☐ Change Addition Director ☐ Delete TITLE TITLE Joy E. Taylor NAME STREET ADDRESS STREET ADDRESS 2501 Lynbrook Yardley, PA 19067 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change . Addition ☐ Delete TITLE 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 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:

J. Eric Vaylor, ID. Presiden