

2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Sep 13, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000016077

1. Entity Name
CONCEPT OPEN IMAGING CENTER, LLC



Principal Place of Business

875 N. MILITARY TRAIL
SUITE 101
JUPITER, FL 33458 US

Mailing Address

875 N. MILITARY TRAIL
SUITE 101
JUPITER, FL 33458 US



07272005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SINGER, MICHAEL S
3801 PGA BLVD., SUITE 604
PALM BEACH GARDENS, FL 33410

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IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by September 7, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HOFFMAN, MICHAEL
STREET ADDRESS	2290 10TH AVENUE NORTH, #101
CITY-ST-ZIP	LAKE WORTH, FL 33461

TITLE	
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CITY-ST-ZIP	

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CITY-ST-ZIP	

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09/13/05-80002-013 50.00

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]*

9/9/05

561-542-2700

Date

Daytime Phone #