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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600008295 (3)

ULTRAIONIC X-RAY SERVICES, INC.

Principal Place of Business

Mailing Address

FILED May 04 1998 8:00am Secretary of State



7171 CORAL WAY #316 MIAMI FL 33155		7171 CORAL WAY #316 MIAMI FL 33155							
						DO NOT WRITE IN TH	IIS SPACE		
						3. Date Incorporated or Qualified			
2. Principal P	Place of Business	2a. Mailing Address				01/26/1996 4. FEI Number		and the state of t	
21		26				65-0643721		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.						Additional	
22 City & State		27 City 6 Ciaty				5. Certificate of Status Desired	Fee Required		
—	е	City & State				6. Election Campaign Financing	\$5.00 May Be		
23 Zip	Country	Zip Country				Trust Fund Contribution			
24	25	29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
= 1	9. Name and Address of Current		001			10. Name and Address of New Register			
GO	DMEZ, MARIA A			81	Name				
71		1	82	Ctroot Add	roos (D.O. Pou Number in Net Assessable)				
	AMI FL 33155	62 Street Ad		Street Add	ress (P.O. Box Number is Not Acceptable)				
				83					
·			ŀ	84	City		85 Zip	Code	
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 607.0506, Florida Statutes.									
SIGNATURE Signature, typed or product nature of traps tercol agent are title if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AND		: Registered	Agent	signativre requ	ADDITIONS/CHANGES TO OFFICERS A		DC (N 12	
TITLE	PD	DELETE	1.1 TITE	LE		ADDITIONS/CHANGES TO OTTICERS A	Change	Addition	
NAME	CAZARES, PIERRE		1.2 NAME				01.4.190		
STREET ADDRESS	7171 CORAL WAY #316				DDRESS				
CITY-ST-ZIP	MIAMI FL 33155		1.4 CIT						
TITLE	VD	DELETE	2.1 TITI				Change	Addition	
NAME	GOMEZ, MARIA A		2.2 NAM	ME					
STREET ADDRESS	7474 OODAL WAY #040		2.3 STR	REET AC	DDRESS				
CITY-ST-ZIP	MIAMI FL 33155	MANUEL OOJEE		1Y-\$1-	1				
TITLE		DFLETÉ	3.1 TITL				Change	Addition	
NAME			3.2 NAM	ME				_	
STREET ADDRESS	■		3.3 STR	REET AC	DDRESS			ŀ	
CITY-ST-ZIP	Z#P		3.4. CITY-ST-ZIP		ZIP				
TITLE	DELETE 4.1		4.1 TITL	LE			Change	Addition	
NAME	4.2		4. 2 NA	ME					
STREET ADDRESS			4.3 STR	REET AC	DDRESS				
CITY-ST-ZIP			4.4 CITY	Y-ST	ZIP				
TITLE		DELETE	5.1 TITL	LE			Change	☐ Addition	
NAME			5.2 NAN	ME					
STREET ADDRESS			5.3 STR	EE1 AC	ODRESS			ŀ	
CITY-ST-ZIP	:		5.4 CITY	Y-ST-	ZIP				
TITLE) DELETE		6.1 TITU	6.1 TITLE			Change	☐ Addition	
NAME			6.2 NAN	ΜE					
STREET ADDRESS			6.3 STR	EE1 AD	DDRESS			1	
CITY-ST-ZIP			6.4 CITY						
officer or o	ertify that the information supplied will on this annual report or supplemental director of the corporation or the recei or Block 13 if changed, or organ altact	annual report is true and accu ver or trustee empowered to e:	the exer trate and xecute th	mptio that is rep	on stated in my signatu port as req	Section 119.07(3)(i), Florida Statutes. I further ire shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and the	certify that the under oath; th at my name ap	e information lat I am an opears in	