

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000081478

Entity Name: LIGHTHOUSE RADIOLOGY, INC.

Current Principal Place of Business:

648 NW 21 STREET
WILTON MANORS, FL 33311

Current Mailing Address:

648 NW 21 STREET
WILTON MANORS, FL 33311

FEI Number: 27-3623799

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCEWEN, VICTORIA
648 NW 21 STREET
WILTON MANORS, FL 33311 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title D
Name MCEWEN, VICTORIA
Address 648 NW 21 STREET
City-State-Zip: WILTON MANORS FL 33311

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: VICTORIA MCEWEN

PRESIDENT

01/15/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date