## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000040878

Entity Name: AV MEDICAL IMAGING SERVICES CORP

**Current Principal Place of Business:** 

11721 WEST ATLANTIC BLVD 7-35

CORAL SPRING, FL 33071

## **Current Mailing Address:**

11721 WEST ATLANTIC BLVD 7-35 CORAL SPRING, 33071 BR

FEI Number: 45-5189881 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

VASQUEZ, AICARDO SR 11721 WEST ATLANTIC BLVD 7-35 CORAL SPRING, FL 33071 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

FILED Mar 11, 2014

**Secretary of State** 

CC3255324421

## Officer/Director Detail:

Title P

Name VASQUEZ, AICARDO
Address 11721 W ATLANTIC BLVD

**APTO 7-35** 

City-State-Zip: CORAL SPRINGS FL 33071

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: AICARDO VASQUEZ PRESIDENT 03/11/2014

Electronic Signature of Signing Officer/Director Detail

Date