

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001144

**FILED**  
**Apr 28, 2016**  
**Secretary of State**  
**CC2694121778**

**Entity Name:** MEDICAL IMAGING SOLUTIONS GROUP, INC. OF TEXAS

**Current Principal Place of Business:**

229 ARNOLD MILL RD SUITE 100  
WOODSTOCK, GA 30188

**Current Mailing Address:**

229 ARNOLD MILL RD SUITE 100  
WOODSTOCK, GA 30188

**FEI Number:** 02-0584110

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

INCORP SERVICES, INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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	CP	Title	DST
Name	BATES, ARNOLD L	Name	BATES, VIVIAN R
Address	229 ARNOLD MILL RD SUITE 100	Address	229 ARNOLD MILL RD SUITE 100
City-State-Zip:	WOODSTOCK GA 30188	City-State-Zip:	WOODSTOCK GA 30188

*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:** VIVIAN BATES

**SECRETARY & CFO**

**04/28/2016**

Electronic Signature of Signing Officer/Director Detail

Date