

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED Apr 11 1996 8:00 am Secretary of State

DOCUMENT # 340077 (7)

1. Corporation Name RADIOLOGY AND NUCLEAR MEDICINE INC

Principal Place of Business: 3900 BROADWAY AVENUE BLDG #18 FT. MYERS FL 33901
Mailing Address: 3900 BROADWAY AVENUE BLDG #18 FT. MYERS FL 33901



2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-fields for Suite, City & State, Zip, and Country.

3. Date Incorporated or Qualified: 01/13/1969
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-1237356
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [X] Yes [ ] No

9. Name and Address of Current Registered Agent

MICHAEL L. CARLINO MD
3900 BROADWAY AVE #18
FORT MYERS FL 33901

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature must be witnessed)

DATE

12. OFFICERS AND DIRECTORS. Table with columns for Title, Name, Street Address, City-St-Zip, and a Delete checkbox. Includes entries for PS CARLINO, MICHAEL and VD JOSEPH R. PUGH MD.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Table with columns for Title, Name, Street Address, City-St-Zip, and checkboxes for Change and Addition.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Signature and typed or printed name of signing officer or director

CR2E034 (12/95)