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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # 600330 (5)

1. Corporation Name
RADIOLOGISTS of NORTH FORT LAUDERDALE, P.A.

Principal Place of Business	Mailing Address
~~4461 NORTH FEDERAL Hwy~~	~~4461 NORTH FEDERAL Hwy~~
~~OAKLAND PK, FL 33308~~	~~OAKLAND PARK, FL 33308~~

3. Date Incorporated or Qualified: 12/29/1967
3a. Date of Last Report: 2/95

2. Principal Place of Business
21 c/o Holy Cross Hosp.
22 Suite, Apt. #, etc.: 4725 N. FEDERAL Hwy
23 City & State: FT LAUDERDALE FL
24 Zip: 33308
25 Country: BROWARD

2a. Mailing Address
26 PO Box 11006
27 Suite, Apt. #, etc.:
28 City & State: FT LAUDERDALE FL
29 Zip: 33339
30 Country: BROWARD

4. FEI Number: 59-1198209 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TATE, CHARLES F.
4461 N. FEDERAL Hwy
OAKLAND PARK, FL 33308

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD ☐ DELETE	1.1 TITLE	VPD ☐ Change ☐ Addition
NAME	BACHOW, TERRY B.	1.2 NAME	TATE, CHARLES F.
STREET ADDRESS	4725 N. FEDERAL Hwy	1.3 STREET ADDRESS	4725 N. FEDERAL Hwy
CITY-ST-ZIP	FT LAUDERDALE FL 33308	1.4 CITY-ST-ZIP	FT LAUDERDALE FL 33308
TITLE	VPTD ☐ DELETE	2.1 TITLE	VPD ☐ Change ☐ Addition
NAME	BAKER, RICHARD T.	2.2 NAME	WILKOV HOWARD R.
STREET ADDRESS	4725 N. FEDERAL Hwy	2.3 STREET ADDRESS	4725 N. FEDERAL Hwy
CITY-ST-ZIP	FT LAUDERDALE FL 33308	2.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33308
TITLE	VPSD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	BETTENHAUSEN RICHARD L.	3.2 NAME	
STREET ADDRESS	4725 N. FEDERAL Hwy	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 33308	3.4 CITY-ST-ZIP	
TITLE	VPD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	GARDINER, HUGH F.	4.2 NAME	
STREET ADDRESS	4725 N. FEDERAL Hwy	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33308	4.4 CITY-ST-ZIP	
TITLE	VPD ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	MEDINA ABDON JR.	5.2 NAME	
STREET ADDRESS	4725 N. FEDERAL Hwy	5.3 STREET ADDRESS	VB 3-18
CITY-ST-ZIP	FT LAUDERDALE FL 33308	5.4 CITY-ST-ZIP	
TITLE	PD ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	STEIN, KENNETH R.	6.2 NAME	200002117552
STREET ADDRESS	4725 N. FEDERAL Hwy	6.3 STREET ADDRESS	-03/19/97--01015--005
CITY-ST-ZIP	FT LAUDERDALE, FL 33308	6.4 CITY-ST-ZIP	***165.00

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 the 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: X Kenneth R. STEIN, PRES 3/12/97 954-776-3239
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Area Code & Daytime Phone Number)