FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

FILED May 13 1998 8:00am Secretary of State

BOCA	HADIOLOGY GROUP, P.A.				
Principal Plac	e of Business	Mailing Address		I HADINE BILLIK BALKA KIRADA INTIK BEAKA HARI ALDIN BEA	iji firif dinii didif didiy idri
2000 GLADES	S RD.	P.O. BOX 810969			
210 P.O. BOX 2366				DO NOT WRITE IN THIS	SPACE
BOCA RATON FL 33431 BOCA RATON FL 33 US US		BOCA RATON FL 33481-01	3. Date Incorporated or Qualified		JOINOL
		•		08/20/1970	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1301771	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. ₩, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat		City & State			Fee Required
23	t e	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 _{(P}	Country	8. This corporation owes or has paid the cr	
24	25	├ ─ `	30	· ·	Yes No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	d Agent
PO	LLOCK, EDWARD J.		81 Name		
2000 GLADES RD., #210			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33431					
			83		
			84 City		85 Zip Code
==-		·		FI	<u>- </u>
office or agent. La	to the provisions of Sections 607 050 registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was a alions of, Section 607.0505, Flor	s, the above-named corporation of the corporation o	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	or chariging its registered ipointment as registered
SIGNATURE					
	Signature, typed or printed name of registered age	ent and title it applicable (NOTE	Registered Agent signature requir	ADDITIONS/CHANGES TO OFFICERS AN	ID DIDECTORS IN 10
12.	VPD OF TICENS AIN	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	ZIMSKI, EDMOND		1.2 NAME		
STREET ADDRESS	2000 GLADES RD., #210		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		Change Addition
NAME	POLLOCK, EDWARD		2.2 NAME		
STREET ADDRESS	2000 GLADES RD., #210		2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE		Change Addition
NAME	STEIN, JONATHAN		3.2 NAME		
STREET ADDRESS	2000 GLADES RD., #210		3.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		34. CITY-ST-ZIP		
TITLE	D	DELETE	4.1 TOTLE		Change Addition
NAME	MAZZEO, VINCENT		4. 2 NAME		
STREET ADDRESS	2000 GLADES RD., #210		4.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL	DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE	D D	☐ DECENE	51 TITLE		☐ Change ☐ Addition
NAME	POLLOCK, EDWARD		5.2 NAME		
STREET ADDRESS	2000 GLADES RD., #210		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	BOCA RATON FL VPD	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE	1-11-11-11-11-11-11-11-11-11-11-11-11-1	Change Addition
NAME	ZIMSKI, EDMOND	LJ OLLLIE	6.2 NAME		El sugardo El rapación
CIBELL AUDBECC	2000 GIADES RD 4210		6.2 NOWIC		

14. Thereby 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.

(54) 391-1728