

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

FILED
Apr 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 856865 (1)
1. Corporation Name
ATL ULTRASOUND, INC.

Principal Place of Business
22100 BOTHELL EVERETT HWY
BOTHELL WA 98021
US

Mailing Address
PO BOX 3003
BOTHELL WA 98041-3003
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/22/1983	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 91-0895332	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	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	VTD	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GILLIS, HARVEY			1.2 NAME			
STREET ADDRESS	22100 BOTHELL EVERETT HWY			1.3 STREET ADDRESS			
CITY-ST-ZIP	BOTHELL WA			1.4 CITY-ST-ZIP			
TITLE	VSD	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	YORKS, W BRINTON			2.2 NAME	VS		
STREET ADDRESS	22100 BOTHELL EVERETT HWY			2.3 STREET ADDRESS	YORKS, W BRINTON		
CITY-ST-ZIP	BOTHELL WA			2.4 CITY-ST-ZIP	22100 BOTHELL EVERETT HWY		
TITLE	PD	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FILL, DENNIS C			3.2 NAME			
STREET ADDRESS	22100 BOTHELL EVERETT HWY			3.3 STREET ADDRESS			
CITY-ST-ZIP	BOTHELL WA			3.4 CITY-ST-ZIP			
TITLE	AT	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DAY, TRACY			4.2 NAME			
STREET ADDRESS	22100 BOTHELL EVERETT HWY			4.3 STREET ADDRESS			
CITY-ST-ZIP	BOTHELL WA			4.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BLEM, DONALD			5.2 NAME	VT		
STREET ADDRESS	22100 EVERETT HWY			5.3 STREET ADDRESS	RICHARD TOTORICA		
CITY-ST-ZIP	BOTHELL WA			5.4 CITY-ST-ZIP	22100 BOTHELL EVERETT HWY		
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME				6.2 NAME	V		
STREET ADDRESS				6.3 STREET ADDRESS	PAMELA DUNLAP		
CITY-ST-ZIP				6.4 CITY-ST-ZIP	22100 BOTHELL EVERETT HWY		

14. I 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:

3/31/98 (425) 487-8184

CR2E034 (10/97)