## 2007 LIMITED PARTNERSHIP ANNUAL REPORT

## **FILED** Due By May 1, 2007 Apr 11, 2007 08:00 A Secretary of State **DOCUMENT # A01000001438** OPEN MAGNETIC SCANNING, LTD. Principal Place of Business Mailing Address 4805 N. DIXIE HWY. **4805 NORTH DIXIE HIGHWAY** OAKLAND PARK, FL 33334 OAKLAND PARK, FL 33334 04082007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1147871 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WINDSOR, RAYMOND M DO NOT WRITE 240 TORCHWOOD AVE. PLANTATION, FL 33324 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION 12. P01000016325 DOCUMENT # WINDSOR MEDICAL INVESTMENTS, INC. NAME STREET ADDRESS 240 TORCHWOOD AVE. CITY-ST-ZIP PLANTATION, FL 33324 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes