2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

## FILED Feb 08, 2005 08:00 AM Secretary of State

DOCUMENT # A29178  1. Eritity Name MARTIN MAGNETIC IMAGING, LTD.				36	ecretar	y or State
Principal Place of Business 625 RIVERSIDE DRIVE STUART, FL 34994	Mailing Address P.O. BOX 5 STUART, FL 34995					
2. Principal Place of Business	3. Mailing Address	· · · ·				
Suite, Apt. #, etc.	Suite, Apt. #, etc.			01102005 Chg-LP	CR2E003	(10/03)
City & State	Oity & State			4. FEI Number 65-0157580		Applied For Not Applicable
Zip Country	Zip	Country	,	5. Certificate of Status Desired		. <b>75</b> Additional Required
6. Name and Address of Current	Registered Agent		Name	7. Name and Address of New	Registered Age	nt
POMERANCE, DAVID M 625 RIVERSIDE DRIVE STUART, FL 34994		_		P.O. Box Number is Not Acceptab	le)	
			City		FL	Zip Code
The above named entity submits this statement for the obligations of registered agent.	or the purpose of changing i	its registered	office or register	ed agent, or ่ยังให้, in the State of F	lorida I am fami	liar with, and accept
SIGNATURE Signature, typed or printed name of registered agen	and file il applicable	<del> </del>			DATÉ	<del></del>
9. Capital Contributions as Shown on record \$350,000.00	10. Amount of Cap in FLORIDA to		tions			
A GENERAL PARTNER NOTE: General Partners M				ERED AND ACTIVE WITH T		r.
12. GENERAL PARTNE	R INFORMATION	13.	1	ADDRESS CH	HANGES ONLY	
DOCUMENT # K63068 _ MMRI, INC.	MMRI, INC.		ADCRESS		<u> </u>	
STREET ADDRESS 625 RIVERSIDE DRIVE CITY-ST-ZIP STUART, FL 34994		CITY-ST	r-2iP		·	<u></u>
DOCUMENT # NAME	•	STREET	ADDRESS	80001 12708703	00219984 5-80049-0	119 526 25
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STREET ADDRESS CITY-ST-ZIP		CITY-\$1	I - ZIP			
DOCUMENT # NAME	*	STREET	ADDRESS			
STRELT ADDRESS CITY-ST-ZIP		CITY+\$T				
I hereby certify that the information supplied with indicated on this report is true and accurate and the receiver or trustee ampowered to execute it.	h this filing does not qualify in that my signature shall have port as required by Charles	for the exemp ve the same le apter 620, Flo	otion stated in Sec egal effect as if m orida Statutes	ction 119 07(3)(i), Florida Statutes lade under oath; that I am a Gener	. I further certify that Partner of the	hat the information limited partnership or
SIGNATURE:	P PRINTED NAME OF SIGNING GENE			1-31-05	(772);	1997 1996