## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

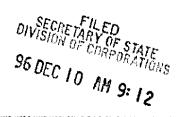
1. Name of Limited Partnership

**SIGNATURE** 

Typed or Printed Name of General Partner Signing Form

A32325

## MAGNETIC RESONANCE INSTITUTE OF ORLANDO, LTD.





		0012/12		
Mailing Address C/O IMI ACQUISITION CORPORATION 160 BROADWAY NEW YORK NY Principal Office Address 2424 N. FEDERAL HIGHT SUITE 410 BOCA RATON FL 33431		3. Date Formed or Registered 12/11/1991 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$1,000.00	
		01/18/1996  4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address	FL.		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6, FE: Number - <b>59-3265960</b>	Applied For	
City & State	City & State			
Zip Country	Zip Cour		\$8.75 Additional Fee Required	
		8, Make check payable to: Dep	t. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent		10. If changed, new Regist	10, if changed, new Registered Agent/Office	
SCHULMAN, STEPHEN A M.D. 610 GLADES ROAD BOCA RATON FL 33431		Name		
		Street Address (P.O. Box Number Is Not Acceptable)		
		Suite, Apt. #, etc.		
	On	City Zip Code		
10a. Pursuant to the provisions of sections 620, 1051 for the purpose of changing its registered office agent if am familiar with, and accept the obligations of the section of the sectio	or registered agent, or both, in the State of Florida Stions of section 620.192, Florida Statutes.	uch change was authorized by its general partner(s). H	of the State of Florida, submits this statement hereby accept the appointment of registered	
A GENERAL PARTNER THA	T IS A CORPORATION, LIM	ITED PARTNERSHIP OR OTH		
11. Name(s) of General Partner(s)	ST BE REGISTERED AND A  11a. (Do NOT Use Post Office Box No.		11c. Registration/	
IMI ACQUISITION OF ORLANDO C	C/O IMI ACQUISITION C	NEW YORK NY 10038	Document Nomber	
			P94000048483	
		·		
		ምና ምክ ነገኝ የ <b>ግ</b> ዚያች	10h0014H	
		-12	020281903 /13/9601001-017	
•		※字	**191.25 ****191.25	
Note: General partners MAY N	OT be changed on this form; a	n amendment must be filed to c	hange a general partner.	

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I release the Division of

LEWIS SCHILLER

of non-compliance with Section 119 07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on

signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

0000197