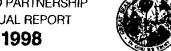
## FILE ON OR BEFORE APRIL 8,1998 TO AVOID **REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT

C/O GRADIENT MANAGEMENT INVESTMENTS. INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1. Name of Limited Partnership

6267 TERRA ROSA CIRCLE

**BOYNTON BEACH FL 33437** 

Mailing Address

**DOCUMENT #** A97000002837

C/O GRADIENT MANAGEMENT INVESTMENTS. INC.

Principal Office Address

6267 TERRA ROSA CIRCLE

**BOYNTON BEACH FL 33437** 

OPEN MAGNETIC IMAGING OF PEMBROKE PINES, LTD.



98 ATR - 8 PK 3: 04



3. Date Formed or Registered

12/23/1997

3a. Date of Last Report

**5a.** Capital Contributions as Shown on record.

\$1,000.00

|  |  |  | 4  | 5b. Amount of Capital<br>Contributions in FLORIDA<br>to date: |
|--|--|--|--|---|
| 2. Mailing Address   | 2a. Principal Office Address                 |  | 4. State or Country of Formation   | \$ 500  |
| Suite, Apt. #, etc.  | Suite, Apt. #, etc.                          |  | 6. FEI Number  | Applied For   |
| City & State   | City & State                                 |  | 7. Certificate of Status Desired   | \$8.75 Additional Fee Required                                |
| Zip Country  | Zip  | Country  | 8. Make check payable to: Dept. of   | Fee Required State (See reverse side for fee information)     |
| 9. Name and Address of Current Re  | gistered Agent                               | 1  | 10. If changed, new Registered   | d Agent/Office  |
| DELGADO, MARIO R ESQ.  |  | Name   |  |   |
| 306 ALCAZAR AVENUE, SUITE 302  |  | Streel Address (P.O. Box Number is Not Acceptable)                       |  |   |
| CORAL GABLES FL 33134  | Suite, Apt. #, etc. BD0002486818             |  | 486818 6   |   |
|  |  | 800002486818 6<br>ciy -04/13/380110600-005<br>*****150.00-   *****150.00 |  |   |
| for the purpose of changing its registered office or reg<br>agent. I am familiar with, and accept the obligations of<br>SIGNATURE (Registered Agent Accepting Appointment) | section 620, 192, Florida Syllutes           |  | DATE   | 3.31.98   |
| MUSI   | BE REGISTERED AND                            | DACTIVE WI   | In Inia Office.  | Basinetari  |
| 11. Name(s) of General Partner(s)  | 11a. (Do NOT Use Post Office Box             | Pariner<br>× Numbers) 11b.   | City, State & Zip Code   | Document Number   |
| GRADIENT MANAGEMENT INVESTME   | 6267 TERRA ROSA CIRC                         | EL BC  | DYNTON BEACH FL 3343   | P97000077656  |
|  |  |  |  |   |
| <u> </u>   |  |  |  |   |
| Note: General partners MAY NOT b   |  |  |  |   |
| 12. I do hereby certify that the information supplied with this I  | filing is voluntarily furnished and does not | t qualify for the exemption  | stated in Section 119.07(3)(k), Florida:   | Statutes. I release the Division of                           |
| this annual report is true and accurate and that my signal<br>empowered to execute this priport of required by chapter   | ture shall have the same legal effects as i  | ormation supplied is deer  | med exempt from public access. I furthing a certify that I am a General Partner of | er certify that the information Indicated on                  |