

**FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAR -9 AM 8:42	
1. Name of Limited Partnership Open Magnetic Imaging of Pembroke Pines, Ltd		1a. DOCUMENT # A97000002831			
Mailing Address 801 S. University Drive Suite C-136A Plantation, FL 33324		Principal Office Address 801 S. University Drive Suite C-136A Plantation, FL 33324		3. Date Formed or Registered 12-23-97 3a. Date of Last Report 4-8-98 4. State or Country of Formation Florida 5a. Capital Contributions as Shown on record \$1,000 5b. Amount of Capital Contributions in FLORIDA to date \$1,000	
2. Mailing Address 330 S. Flamingo Rd. Suite, Apt #, etc. City & State Pembroke Pines, FL Zip 33027 Country USA		2a. Principal Office Address 330 S. Flamingo Rd. Suite, Apt #, etc. City & State Pembroke Pines, FL Zip 33027 Country USA		6. FEI Number 105-0779361 ☐ Applied For ☒ Not Applicable 7. Certificate of Status Desired ☒ \$8.75 Additional Fee Required 8. Make check payable to Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent Mario R. Delgado, Esq. Mario R. Delgado, P.A. 2151 W. Juane Road, Suite 202 Coral Gables, FL 33134		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt #, etc. City FL Zip Code	
10a. Pursuant to the provisions of sections 620.1251 and 620.192, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.			
SIGNATURE (Registered Agent Accepting Appointment)		DATE 1-12-99	

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) Tesla, Inc.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 801 S. UNIVERSITY DR. SUITE C-136A	11b. City, State & Zip Code PLANTATION, FL 33324	11c. Registration/Document Number P9800001115 200002802712--4 -03/11/99--01082--005 ****150.00 ****150.00
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change 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 Corporations from any liability 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 this annual report is true and accurate and that my 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 empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Nelson Acosta, Pres., Tesla, Inc., Daytime Telephone Number

JAN 12TH 1999
 954-404-8664

CP2E003 (8/98)