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Special Instructions to	Eiling Officer	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 15, 2006

LAERENCE ZAGLIN
THE ASHLAR 13001 CORBEL CIR #1626
FT MYERS, FL 33907

SUBJECT: ULTRASOUND IMAGING CORPORATION

Ref. Number: W06000050148

We have received your document for ULTRASOUND IMAGING CORPORATION and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Cynthia Blalock Document Specialist

Letter Number: 306A00066935

FILED

COVER LETTER

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•	COVER LI	ETTER	SECRETARY OF OF
TO: New Filing Section			SEGRETARY OF STATE TALLAHASSEE, FLORIDA
Division of Corporations			
SUBJECT: UCTVASOUND /	MAGING	COR POPATION	/
SUBJECT: UCTVASOUND /	e of corporation	n - must include suffix)
Dear Sir or Madam:			
The enclosed "Application by Foreign Co "Certificate of Existence," and check are transact business in Florida.			
Please return all correspondence concern	ing this matter	to the following:	
Please return all correspondence concerns LAWRENCE ZA 9LIN			
·	(Name of	Person)	
ULTVATOUND IMAGING	corpora	TION	
	(Firm/Cor	npany)	
THE ASHLAR, 13001 C	ORBY C	ircle, #16	26
	(Addr	ess)	
FT Myers, FL 33°	907		
	(City/State a	nd Zip code)	
For further information concerning this m	natter, please ca	all:	
LAWARACE TAGINAL	Dao	746-6550	•
(Name of Person)	at ((Area C	Ode & Davtime Telep	hone Number)
,	`		,
STREET/COURIER ADDRES	SS:	MAILING	
New Filing Section Division of Corporations		New Filing S Division of C	
Clifton Building		P.O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32301		Tallahassee,	FL 32314
Enclosed is a check for the following amo	ount:		
\$70.00 Filing Fee \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

RE	EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.		
1.	ULTVASOVAD IMAGING COV POVATION (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	NON 90	
••	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	10V 28	FLED
	GLTVATOURD THE VITVAJOUND STORE	=	0
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	•	
2	(State or country under the law of which it is incorporated) 3. FED TAX 10 4: 58-2000-47 Fri (FEI number, if applicable)	50	
۷.	(State or country under the law of which it is incorporated) (FEI number, if applicable)		
4.	(Date of incorporation) 5/15/1992 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")	_	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")		
6.			
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7	The Ashlan 13001 Corbel Civile, # 1626 FT MYEVS, FL	331	907
/	The Ashlar. 13001 Corbel Civile, #1626, FT Myers, FL (Principal office address)		
		_	
•	(Current mailing address)		
8.	PROVIDE EDUCATION FOU Physicians (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	-	
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)		
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		
	Name: LAWRENCE ZNGLIV		
Of	Mame: LAWRENCE ZAGLIN The Ashlak, 13001 Corbel Circle # 1626		
	City), Florida 33907 (Ziprcode)		
	(City) (Zipicode)		
	. Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the p	olace	

and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties,

42. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: LAWRENCE (LARRY) ZAGLIV

Address: The ASHLAR. 13001 CORBEL CIVCLE # 1626 FT Myers, FL 33907 Vice Chairman: _ Address: __ Director: ____ B. OFFICERS

President: Lawrence 279114 Address: THE ASHIAKI 13001 Corbel Civele #1626 FI MYEVS, FL 33907 Vice President: Address: Secretary: LAWRENCE (LANK) ZA911W Address: The AshiAR, 13001 Corbol civole # 1624, FT Myers, FL 33901 Treasurer: Louvence (Lanny)249/14 Address: The Ashlan. 13001 Corbel Civile 4 1626, FT Myers, FL 33901 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 13. Signature of Director or Officer listed in number 12 of the application)

14. LAWRence (LARRY) ZA9LI~, PRe SIOEHT
(Typed or printed name and capacity of person signing application)

Agent County:

COBB

Officers

Title:

CEO

Name: Address: LARRY ZAGLIN

3830 PACES FERRY

WEST NW ATLANTA GA 30339

Title:

CFO

Name: Address: **LARRY ZAGLIN**

3830 PACES FERRY

WEST NW

ATLANTA GA 30339

Title:

Secretary

Name: Address: LARRY ZAGLIN

3830 PACES FERRY WEST NW

ATLANTA GA 30339

OF NOV 28 AM 1:50

Control No. K209310

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

ULTRASOUND IMAGING CORPORATION

Domestic Profit Corporation

was formed or was authorized to transact business on 05/15/1992 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 22nd day of November, 2006

> Cathy Cox Secretary of State

Certification Number: 407674-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp