

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000593

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: BACTES IMAGING SOLUTIONS, INC.

## Current Principal Place of Business:

2250 4TH AVE SUITE 105  
SAN DIEGO, CA 92101

## New Principal Place of Business:

## Current Mailing Address:

2250 4TH AVE SUITE 105  
SAN DIEGO, CA 92101

## New Mailing Address:

FEI Number: 33-0599237

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MESSINGER, JOHN  
10500 WINE PALM RD  
FT MYERS, FL 33912 US

## Name and Address of New Registered Agent:

MESSINGER, JOHN  
12548 ASTOR PLACE  
FT MYERS, FL 33913 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

03/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BAILEY, WILLIAM  
Address: 17005 BUTTERFIELD  
City-St-Zip: POWAY, CA 92064

Title: S (X) Delete  
Name: KNOX, STEVE  
Address: 2250 4TH AVE SUITE 105  
City-St-Zip: SAN DIEGO, CA 92101

Title: T (X) Delete  
Name: MAGUIRRE, JOHN  
Address: 2250 4TH AVE SUITE 105  
City-St-Zip: SAN DIEGO, CA 92101

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change ( ) Addition  
Name: BAILEY, WILLIAM  
Address: 17005 BUTTERFIELD  
City-St-Zip: POWAY, CA 92064

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM BAILEY

MR.

03/19/2009

Electronic Signature of Signing Officer or Director

Date