FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400000999 (2)

AMERICAN SHARED HOSPITAL SERVICES CORPORATION

							<u> </u>	
Principal Place of Business Mailing Address					F FADRIAD HAIR INSIN OLDER BONG NORTH BRITE NATUR BRITE DRIVE STREET 1881 (1881)			
4 EMBARCADE #3620 SAN FRANCISC		P.O. BOX 92 MODESTO CA 95353-0092					i de	
SAN FRANCIS	OU ON SHITT				3. Date Incorporated or Qualified	3a. Date of Last Re	eport	
					02/28/1994	06/25/1996		
, '	lace of Business	2a. Mailing Address			4. FEI Number	Ap	plied For	
21 26				94-2918118 Not Applicable				
Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75		
22						Fee Re	·	
23 28 28					Election Campaign Financing Trust Fund Contribution	\$5.00 Added 1		
Zip	Country	Zip	Counti	·	B. This corporation has liability for			
24	25	- } }	30	,		Yes No	199.032,	
T. 1	9. Name and Address of Curren		<u></u>		10. Name and Address of New Re	gistered Agent		
CT	CORPORATION SYSTEM		8.	Name				
1200 SOUTH PINE ISLAND ROAD				2 Street Ad	Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324			1	- Credit Ad	dress () .O. Dox (vallos) is Not Acceptate	110)		
,			8:	3				
			8	4 City		85 Zip (Code	
				1		FL ()	!	
11. Pursuant office or r agent La	to the provisions of Sections 607.0502 registered agent, or both, in the State im familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo	es, the abor uthorized b rida Statuti	ve-named co by the corpor es.	orporation submits this statement for the pration's board of directors. I hereby accept	ourpose of changing its pt the appointment as	s registered registered	
SIGNATURE								
12.	Signature: typed or printed name of registered age: OFFICERS AND		13.	gent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	O INI 12	
THUE	CCEO	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	Change	Addition	
NAME	BATES, ERNEST A	- Otterie	1.2 NAME	ļ		Company of the Compan		
STREET ADDRESS	4 EMBGRCADERO CTR. #3620	1		ET ADORESS	4 Embarcadero CTR	3620		
CHY-S1-7IP	SAN FRANCISCO CA 94111-41		1.4 City	er.7ip	4 Embarcadero CTR San Francisco, CA,	94111-4155	•	
TITLE	CFOV	DELETE	2.1 TITLE	31-211		Change	Addition	
NAME	TAGAWA, CRAIG K SR	_	2.2 NAME	. 1				
STREET ADDRESS	4 EMQRCADERO CTR. #3620			E1 ADDRESS	4 Embarcadero C.T. San Francisco, CA.	R. 3620		
CITY - \$1 - 7/P	SAN FRANCISCO CA 94111-41	155	2. 4 City	- ST-7IP	SAN FRANCISCO CA.	94N1-4155	•	
TITLE	SD	☐ DELETE	3.1 TITLE			Change	☐ Addition	
NAME	BARNES, WILLIE R		3.2 NAME	:				
STHEET ADDRESS	4 EMBARCADERO CTR #3620	V	3.3 STRE	ET ADDRESS				
CITY+ST-ZIP	SAN FRANCISCO CA 94111-41		3.4. CITY	-ST-ZIP				
TITLE	VAAS	☐ DELETE	4.1 TITLE			Change	Addition	
NAME	MAGARY, RICHARD	.7	4. 2 NAM	E				
STREET ADDRESS	4 EMBARCADERO CTR. #3620		4.3 STRE	ET ADDRESS				
CITY - ST - ZIP	SAN FRANCISCO CA 94111-41		4.4 CITY	-ST-ZIP				
TITLE	D	DELETE	5.1 TITLE			Change	Addition	
NAME	HILL, MATTHEW		5.2 NAME					
STREET ADDRESS	4 EMBARCADERO # 3620		5.3 STRE	ET ADDRESS				
CHY-SI-ZiP	SAN FRANCISCO CA		5.4 CITY	-ST-ZIP				
IITLE	D	☐ DELETE	61 TITLE			☐ Change	Addition	
NAME	TROTMAN, STANLEY S		6.2 NAMI					
STREET ADDRESS	4 EMBARCADERO #3620		6.3 STRE	ET ADORESS				
CITY+ST-ZIP	SAN FRANCISCO CA		6.4 CITY					
informatio	on indicated on this annual report or s	upplemental annual report is tr	tile and aci	curate and th	ted in Section 119.07(3)(i), Florida Statute hat my signature shall have the same lega	al effect as if made una	der nath: that	
l am an c	in Block 12 or Block 14 if changed, or	the receiver or trustee empower	ered to exe	ecute this rep	port as required by Chapter 607, Florida S	Statutes; and that my r	iame	

SIGNATURE:

1/7/97 Date

(209) 54-2330×72

FILED

Apr 07 1997 8:00am

Secretary of State