


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90256 048 ***150.00

DOCUMENT # F98000000595

1. Entity Name
COMPREHENSIVE MEDICAL IMAGING, INC.



Principal Place of Business Mailing Address
6464 CANAOGA AVENUE **6464 CANAOGA AVENUE**
WOODLAND HILLS, CA 91367 **WOODLAND HILLS, CA 91367**

24052985



2. Principal Place of Business 3. Mailing Address
7000 Cardinal Place **7000 Cardinal Place**

Suite, Apt. #, etc. Suite, Apt. #, etc.

04122004 Chg-P CR2E034 (10/03)

City & State City & State
Dublin, OH **Dublin, OH**

Zip Country Zip Country
43017 **USA** **43017** **USA**

4. FEI Number Applied For
95-4662473 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FUNARI, ROBERT G 6464 CANOGA AVE. WOODLAND HILLS, CA 913672407 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD DELEVIE, MARK N 6464 CANAOGA AVENUE WOODLAND HILLS, CA 91367 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WARD, DAVID 6464 CANAOGA AVENUE WOODLAND HILLS, CA 91367 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FORSTER, WILLIAM 6464 CANOGA AVENUE WOODLAND HILLS, CA 91367 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BURGOS, ED 6464 CANAOGA AVENUE WOODLAND HILLS, CA 91367 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Richard J. Miller 7000 Cardinal Place Dublin, OH 43017 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President-Tax Michael R. Nelson 7000 Cardinal Place Dublin, OH 43017 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Gordon A. Troup 7000 Cardinal Place Dublin, OH 43017 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Donna Brandin 7000 Cardinal Place Dublin, OH 43017 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Paul S. Williams 7000 Cardinal Place Dublin, OH 43017 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael R. Nelson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 20 2004

614-757-5800

Date Daytime Phone #