

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000006827

1. Entity Name

HOLLYWOOD RESOURCES, INC.

FILED

00 MAY -9 PM 1:42

Principal Place of Business

OPEN MRI OF SOUTH FLORIDA
3700 WASHINGTON ST. STE 101
HOLLYWOOD FL 33021

Mailing Address

C/O MEDICAL RESOURCES, INC
125 STATE ST. STE 200-LEGAL DEPT
HACKENSACK NJ 07601

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

22-3531745

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME DRUMGOOLE, MICHAEL J
STREET ADDRESS 155 STATE STREET
CITY-ST-ZIP HACKENSACK NJ 07601



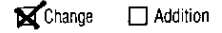
TITLE DP
NAME GEOFFREY A. WHYNOT
STREET ADDRESS 125 STATE STREET, STE 200
CITY-ST-ZIP HACKENSACK, NJ 07601



TITLE VS
NAME JOYCE, CHRISTOPHER J
STREET ADDRESS 155 STATE STREET
CITY-ST-ZIP HACKENSACK NJ 07601



TITLE DVS
NAME CHRISTOPHER J. JOYCE
STREET ADDRESS 125 STATE STREET, STE 200
CITY-ST-ZIP HACKENSACK, NJ 07601



TITLE VT
NAME WHYNOT, GEOFFREY A
STREET ADDRESS 155 STATE STREET
CITY-ST-ZIP HACKENSACK NJ 07601



TITLE V
NAME GERALD H. ALLEN
STREET ADDRESS 449 - 10th AVENUE WEST
CITY-ST-ZIP PALMETTO, FL 34221



TITLE D
NAME MONTOPOLI, DUANE C
STREET ADDRESS 155 STATE STREET
CITY-ST-ZIP HACKENSACK NJ 07601



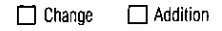
TITLE T
NAME DAVID M. MCCABE
STREET ADDRESS 125 STATE STREET
CITY-ST-ZIP HACKENSACK, NJ 07601



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



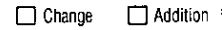
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GERALD H. ALLEN

4-26-00

Date

(727) 723-1800

Daytime Phone #

CR2E034 (9/99)