

ANNUAL REPORT
1999



Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1433728

1. Corporation Name

Triangle Imaging Group, Inc.

FILED
Jun 30, 1999 8:00 am
Secretary of State

06-30-1999 90010 040 ***558.75

Principal Place of Business

Mailing Address

4400 W Sample Rd.
Coconut Creek, FL 33073

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified	
21 800 NW49th St. Ste.100		26 Same		12-12-84	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 100		27		59-2493-183	
City & State		City & State		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
23 Ft. Lauderdale, FL		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip Country		Zip Country		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No	
24 33309 25 USA		29 30		10. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent				81 Name	
Bellezza, Peter A. 4250 N Ala, Apt. 506 N Hutchinson Isl. FL 34949				82 Street Address (P.O. Box Number is Not Acceptable) 1800 NW 49th St. F	
				83 Ste.100	
				84 City	
				Ft. Lauderdale FL	
				85 Zip Code	
				33309	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE <i>[Signature]</i> DATE 6-24-99					
(NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS					
TITLE	P, Director, Vito Bellezza, Vito				
NAME	Bellezza, Vito				
STREET ADDRESS	3715 Turtle Run Blvd.#227				
CITY-ST-ZIP	Coconut Creek, FL 33067				
TITLE	D				
NAME	Bellezza, Peter				
STREET ADDRESS	4250 N Ala Apt. 506				
CITY-ST-ZIP	N Hutchinson Island, FL 34949				
TITLE	D				
NAME	Fideli, Franz				
STREET ADDRESS	820 Bird Way				
CITY-ST-ZIP	Venice, FL 34292				
TITLE	T				
NAME	Seminack, Gregory				
STREET ADDRESS	1800 NW 49th St. Ft.				
CITY-ST-ZIP	Ft. Lauderdale, FL 33309				
TITLE	S				
NAME	Barlow, Peter				
STREET ADDRESS	1800 NW 49th St.				
CITY-ST-ZIP	Ft. Lauderdale, FL 33309				
TITLE	6.1 TITLE				
NAME	6.2 NAME				
STREET ADDRESS	6.3 STREET ADDRESS				
CITY-ST-ZIP	6.4 CITY-ST-ZIP				

14. 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 annual report or supplemental annual 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 12 or Block 13 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

[Signature]
Harold S. Fischer

6-24-99

954-228-5100