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

PROFIT CORPORATION ANNUAL REPORT

1997

**SIGNATURE** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # H61641

(7)

RELIABLE RADIOGRAPHIC SERVICES, INC.

,		Mailing Address	dress			
		12020 N.W. 2ND DR. CORAL SPRINGS FL 330				
					3. Date Incorporated or Qualified 06/05/1985	3a. Date of Last Report 01/26/1996
2. Principal Flace of Business 2a. Mailing Address					4. FEI Number	Applied For
1 26		······		59-2565322	Not Applicable	
Suite, Apt. #, etc.		}¬ ' ' '	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
22	0	City & State				Fee Required
City & State 23	J	28			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>23</b>   Zip	Country	Zip	Count	rv		
24	25 29 30		•	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \( \bigcap \) No		
<u></u>	9. Name and Address of Cu				10. Name and Address of New Reg	
MAR	KOWITZ, EDWARD		6	1 Name	•	
12020 NW 2ND DR.				2 Street Add	ddress (P.O. Box Number is Not Acceptable)	
CORAL SPGS. FL 33071				2 Direct Mac		
			8	3		
				4 City		85 Zip Code
			ľ	Viiy		FL   S   Z   COOC
office or ré	egistered agent, or both, in the 9	7.0502 and 607 1508, Florida Stati State of Florida. Such change was obligations of, Section 607.0505, F	s authorized	by the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered I the appointment as registered
SIGNATURE :						
	Signature typed or principlency of registers			gent signature requ	uired when reinstating)	DATE
12.	OFFICERS OP	S AND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	MARKOWITZ, EDWARD	L. UELCIL	1.2 NAM	j		C) change C Addition
NAME STREET ADDRESS	12020 NW 2ND DR.			ET ADDRESS		
CITY-SI-ZIP	CORAL SPRINGS FL			-ST-ZIP		
TITLE	CONTROL OF THE CONTRO	DELETE	21 TITL			Change Addition
NAME			22 NAM			······ · · ·
STREET ADDRESS			1	ET ADDRESS		
CITY- ST-ZIP		•		-ST-ZIP		6.0
TITLE		DELETE	3 1 TITL			Change Addition
NAME	·		3 2 NAM	E		
STREET ADDRESS			3 3 STR	ET ADDRESS		
CHTY-ST-7iF			3.4. CIT	r-ST-ZIP		
TiTLE		☐ DELETE	4.1 TITL			Change Addition
NAME			4. 2 NAM	ME		
STREET ADDRESS			4.3 STR	ET ADDRESS		
CITY - ST - ZIP			4.4 CITY	- ST - ZIP		
TOLE		☐ DELETE	5.1 TITE	:		Change Addition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STR	ET ADDRESS		
C117 - S7 - ZIP		T 22		- \$1 - ZIP		
THILE		DELETE	6.1 TITE			☐ Change ☐ Addition
			62 NAM	E		
NAME						
NAME STREET ADDRESS			4	ET ADDRESS		
STREET ADDRESS City - ST - Zip		Use at mosts to be filled and a second	6.4 City	-SI-ZIP	ed in Section 119.07(3)(i), Florida Statute	I forther earlify that the