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

May 14 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS **19**98 DOCUMENT # K80037 (0) UNIVERSAL DYNAMIC IMAGING, INC. Principal Place of Business Mailing Address 3065 34TH ST. N P.O. BOX 66765 ST. PETERSBURG FL 33713 ST. PETE BEACH FL 33736 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/13/1989 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 59-2945534 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Yes ☐ No Personal Property Tax due June 30. g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RSIDENT AGENT CORP OF PINELLAS COUNTY 980 TYRONE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33710 83 84 City Zip Code 11. Pursuant to the provisions of Socions 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, Socion 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when re-natating) Signature, typed or pointed name of registered agost and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Addition DELETE TITLE D 1.1 TITLE Change NAME DICUS, AUBREY O., JR 1.2 NAME 980 TYRONE BLVD STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE CANNOVA, MICHAEL F. NAME 2.2 NAME **3065 34TH ST NORTH** 23 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE ☐ Addition TITLE 3.1 THLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$T - ZIP DELETE Change Addition TITLE 4.1 THUE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition

6.2 NAME

14. Thereby 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

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

Marit F Comme

Block 12 or Block 13 if changed, or on an attachment with an address.

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4/80/98 813-528-8845

FILED