## **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

## FILED Apr 06, 2004 8:00 am Secretary of State 04-06-2004 90130 030 \*\*\*\*50.00

DOCUMENT # L02000014104  1. Entity Name IMAGING INVESTMENT GROUP, L.L.C.						04-06-2004	1 901 <b>3</b> 0 030 ***	*50.00
Principal Place of Business Mailing Address								
777 37TH STREET, #D-106 777 37TH STREET, #D-106 VERO BEACH, FL 32960 VERO BEACH, FL 32960								
					 	I BRIJE JIDIJ GRAJI ERAJ BRAJA	ABIBL 11811 BLEST MON REIN B	IERULINI IERI
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		,	03172004	Chg-LLC	CR2E083 (10/03)	į
City & State		City & State			4. FEI Numb 46-049		<del></del>	opplied For lot Applicable
Zip Country		Zip Country			5. Certificate of Status Desired S5.00 Additional Fee Required			
	6. Name and Address of Current I	egistered Agent			7. Name and Address of New Registered Agent			
· · · · · · · · · · · · · · · · · · ·			Name	Name				
JOYCE, PETER H 777 37TH STREET, #D-106			Street	Street Address (P.O. Box Number is Not Acceptable)				
VERO BEACH, FL 32960								<del></del>
			City				FL Zip Coo	de
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 .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: R	egistered Agent sign	ature required	when reinstating)		DATE	
Filing Fee is \$50.00 Due by May 1, 2004				,			check payable to Department of Sta	
9.	MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS/	CHANGES	***************************************
TITLE NAME	MGRM JOYCE, PÉTER H MD	☐ Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS	777 37TH STREET, #D-106		STREET ADDRESS			-		
CITY-ST-ZIP	VERO BEACH, FL 32960		CITY-ST-ZIP					
TITLE NAMÉ	MGRM BISSET, ROBERT R MD	☐ Delete	TITLE NAME	,	•		☐ Change	☐ Addition
STREET ADDRESS	777 37TH STREET, #D-106		STREET ADDRESS	,				
CITY-ST-ZIP	VERO BEACH, FL 32960		CITY-ST-ZIP	<u> </u>				
TITLE NAME	MGRM COLELLA, JAY P MD	☐ Delete	TITLE				Change	Addition
STREET ADDRESS	777 37TH STREET, #D-106		NAME STREET ADDRESS					
CITY-ST-ZIP	VERO BEACH, FL 32960		CITY-ST-ZIP					
TITLE	MGRM	☐ Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS	NAGEL, HEATHER S MD 777 37TH STREET, #D-106		NAME STREET ADDRESS					
CITY-ST-ZIP	VERO BEACH, FL 32960		CITY-ST-ZIP	'				
TITLE	MGRM	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	PUSKAR, GEORGER T MD		NAME					_
STREET ADDRESS CITY-ST-ZIP	777 37TH STREET, #D-106 VERO BEACH, FL 32960	•	STREET ADDRESS CITY-ST-ZIP	1	•		-	
TITLE		Delete	TITLE	MGR	2 M		Change	Addition
NAME			NAME	NEE	KS. MAR	GARET W	MD. = , *	$\sim$
STREET ADDRESS	The second secon	. *	STREET ADDRESS	777	7 37**571	eBET, PPD-10	96	
CITY-ST-ZIP	portification information according to the	this files does not a self. for it	CITY-ST-ZIP			A 32960		
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.								

George T. Puskar