

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028742

FILED
Apr 21, 2004
Secretary of State

Entity Name: MIDTOWN IMAGING, LLC

Current Principal Place of Business:

5405 OKEECHOBEE BLVD., STE. 100, 101 AND 3
01A
WEST PALM BEACH, FL 33417

Current Mailing Address:

5405 OKEECHOBEE BLVD., STE. 100, 101 AND 3
01A
WEST PALM BEACH, FL 33417

New Principal Place of Business:

5405 OKEECHOBEE BLVD.
SUITE 100, 101 AND 301A
WEST PALM BEACH, FL 33417 US

New Mailing Address:

5405 OKEECHOBEE BLVD.
SUITE 100, 101 AND 301A
WEST PALM BEACH, FL 33417 US

FEI Number: 20-0132586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES-FAULI CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DRIVE, SUITE 500 EAST
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

JOHNSON, KEVIN G CFO
5405 OKEECHOBEE BOULEVARD
SUITE 101
WEST PALM BEACH, FL 33417 US

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: KEVIN JOHNSON

04/21/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: BURKE, ROBERT D DR.
Address: 844 HARBOUR ISLES PLACE
City-St-Zip: NORTH PALM BEACH, FL 33410 US

Title: MGRM () Change (X) Addition
Name: WARD, NATHAN
Address: 180 ROYAL PALM WAY, #203
City-St-Zip: PALM BEACH, FL 33480 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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.

SIGNATURE: ROBERT D. BURKE

DR.

04/21/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date