

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059852

**FILED**  
**Feb 07, 2006**  
**Secretary of State**

**Entity Name:** DMX IMAGING OF THE PALM BEACHES, LLC

**Current Principal Place of Business:**

3015 S. CONGRESS AVE., SUITE 1  
LAKE WORTH, FL 33401

**New Principal Place of Business:**

3015 S. CONGRESS AVE., SUITE 2  
LAKE WORTH, FL 33461

**Current Mailing Address:**

3015 S. CONGRESS AVE., SUITE 1  
LAKE WORTH, FL 33401

**New Mailing Address:**

3015 S. CONGRESS AVE., SUITE 2  
LAKE WORTH, FL 33461

**FEI Number:** 20-3044748

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORKINS, GLENN  
3015 S. CONGRESS AVE., SUITE 1  
LAKE WORTH, FL 33401 US

**Name and Address of New Registered Agent:**

CORKINS, GLENN  
3015 S. CONGRESS AVE., SUITE 2  
LAKE WORTH, FL 33461 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:**

02/07/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CORKINS, GLENN  
Address: 3015 S. CONGRESS AVE., SUITE 1  
City-St-Zip: LAKE WORTH, FL 33401

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CORKINS, GLENN  
Address: 3015 S. CONGRESS AVE., SUITE 2  
City-St-Zip: LAKE WORTH, FL 33461

Title: MGRM ( ) Change (X) Addition  
Name: CORKINS, BETZI  
Address: 3015 S. CONGRESS AVE. SUITE 2  
City-St-Zip: LAKE WORTH, FL 33461

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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:** GLENN CORKINS

MGRM

02/07/2006

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