Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90019 027 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

* Secretary of State DIVISION OF CORPORATIONS

DOCUN	JENT#	174885

1. Corporation Name

CHI ECOAST HI TRASOUND TECHNICAL SERVICES INC

doci, oo	AOT DETTIAGOUND TEGIT	NOAE OENTIOLO; INO.			
Principal Place	of Business	Mailing Address			1 (66)(6)) Dir (80)(6)(6) (5)(6) (4)(6) Ann domin andre docks, and in high activities
4615 GULF BLVD. 4615 GULF BLVD. SUITE 205 ST. PETERSBURG BEACH FL 33706 ST. PETERSBURG BEACH FL 33706				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
					05/21/1990
2 Principal D	ace of Business	2a, Mailing Address			4. FEI Number Applied For
2. Tillopart	acc of business	26			59-3017739 Not Applicable
	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip 30	Country		8. This corporation owes the current year Intangible Personal Property Tax. Yes No
1941	9. Name and Address of Currer				10. Name and Address of New Registered Agent
			81	Name	ne
Green, Gilbert D. 4615 Gulf Blyd.			82	Street	eet Address (P.O. Box Number is Not Acceptable)
	E 205		83		
ST. PETERSBURG BEACH FL 33706		84	City	FL 85 Zip Code	
agent. I al	M ramiliar with, and accept the obligation of registered age				orporation's board of directors. I hereby accept the appointment as registered
12.	1 2 1	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.1 TITLE		Change Addition
NAME	GREEN, LORI G.		1.2 NAME		
STREET ADDRESS	1212 BOCA CIEGA ISLE		1.3 STREET		ESS
CITY-ST-ZIP	ST. PETERSBURG FL 33706		1.4 CITY-ST-ZiP		☐ Change ☐ Addition
TITLE	DV CENC LODETTA O	☐ DELETE	2.1 TITLE		
NAME STREET ADDRESS	sens, loretta s. 7843 Causeway Blvd., n.		2.2 NAME 2.3 STREE	LVUUDEGG	Fee
	ST. PETERSBURG FL 33707		2.4 CITY-5		
CITY-ST-ZIP TITLE	DST DST	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GREEN, GILBERT D.		3.2 NAME		
STREET ADORESS	1212 BOCA CIEGA ISLE		3.3 STREE	ADDRESS	ESS
CITY+ST-ZIP	ST. PETERSBURG FL 33706		3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREE		ESS
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	☐ Change ☐ Additi
TITLE			5.1 TITLE 5.2 NAME		- Change - Institute
NAME			5.3 STREE	T ADDRESS	ESS
STREET ADDRESS			—	,	

CITY-ST-ZIP 14. 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 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 Block 12 or Block 13 if changed, or on apparatch ment with an address, with all other like empowered.

5.4 CITY+ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

☐ DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Dreffe Gregar DiGreen

727-363-*450*0

☐ Change

☐ Addition