2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000085139

Entity Name: FAMILY OPEN MRI, INCORPORATED

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1931 W. M. SUITE F TAMPA, FL	L. KING BLVD. 33607					
Current Mailing Address:				New Mailing Address:		
1931 W. M.L. KING BLVD. SUITE F TAMPA, FL 33607				607 W. MARTIN LUTHER KING BLVD SUITE 103 TAMPA, FL 33603		
FEI Number:	mber: 14-1842040 FEI Number Applied For () FEI N		FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
KALISH, WILLIAM 100 S ASHLEY DR STE 1500 TAMPA, FL 33602 US				KALISH, WILLIAM 401 EAST JACKSON STREET SUITE 1700 TAMPA, FL 33602 US		
The above in the State		ıbmits this statement for the pur	pose of	f changing it	s registered of	ffice or registered agent, or both,
SIGNATURE:				04/24/2006		
Electronic Signature of Registered Agent						Date
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	D () E LIEDKE, ROBER 1931 W. MLK BL TAMPA, FL 3360	VD, SUITE F		Title: Name: Address: City-St-Zip:	OZECHOV, YGA	LUTHER KING BLVD, SUITE 103
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:	SEGAL, YAIR	Change (X) Addition I LUTHER KING BLVD, SUITE 103 803
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:	ULATOWSKI, TO	LUTHER KING BLVD, SUITE 103
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:	GLOGAU, AMIR	LUTHER KING BLVD, SUITE 103

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMIR GLOGAU PRES 04/24/2006