2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089804

Entity Name: FAMILY OPEN MRI OF ORLANDO, INCORPORATED

FILED Apr 01, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1931 W. M.L. KING BLVD. 6388 SILVER STAR ROAD SUITE F SUITE 1-A

TAMPA, FL 33607 ORLANDO, FL 32818

Current Mailing Address: New Mailing Address:

1931 W. M.L. KING BLVD. SUITE F TAMPA, FL 33607

FEI Number: 33-1019107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GLASER, ROBERT KALISH, WILLIAM 607 MLK BLVD. 100 S. ÁSHLEY DR SUITE 103 SUITE 1500 TAMPA, FL 33603 US TAMPA, FL 33602 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: WILLIAM KALISH

04/01/2005 Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

GLASER, ROBERT LIEDKE, ROBERT Name: Name:

607 W. M.L. KING BLVD. SUITE 103 Address: 1931 W. M.L. KING BLVD. SUITE F Address:

City-St-Zip: TAMPA, FL 33603 US City-St-Zip: TAMPA, FL 33607 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 Statutés. 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: ROBERT LIEDKE 04/01/2005 D