2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 07, 2009
Secretary of State

DOCUMENT# P02000127320

Entity Name: SONOTECH SERVICES & IMAGING, INC.

Current Principal Place of Business:

3994 CHERRYBROOK LOOP
FT MYERS, FL 33966

New Principal Place of Business:

10440 CAROLINA WILLOW DR.
FT MYERS, FL 33913

Current Mailing Address:

3994 CHERRYBROOK LOOP
FT MYERS, FL 33966

New Mailing Address:

10440 CAROLINA WILLOW DR.
FT MYERS, FL 33913

FEI Number: 01-0758138 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERRY, CAMELA
3994 CHERRYBROOK LOOP
FT MYERS, FL 33966 US

Name and Address of New Registered Agent:

BERRY, CAMELA
10440 CAROLINA WILLOW DR.
FT MYERS, FL 33913 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: CAMELA BERRY 10/07/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BERRY, CAMELA
Address: 3994 CHERRYBROOK LOOP
City-St-Zip: FT MYERS, FL 33966

Title: PTV ( ) Delete
Name: BERRY, CHAD
Address: 3994 CHERRYBROOK LOOP
City-St-Zip: FT MYERS, FL 33966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: BERRY, CAMELA
Address: 10440 CAROLINA WILLOW DR.
City-St-Zip: FT MYERS, FL 33913

Title: PTV (X) Change ( ) Addition
Name: BERRY, CHAD
Address: 10440 CAROLINA WILLOW DR.
City-St-Zip: FT MYERS, FL 33913

I hereby certify that the information supplied with this filing does not qualify 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: CHAD BERRY PTV 10/07/2009
Electronic Signature of Signing Officer or Director Date