

2007 FOR PROFIT CORPORATION ANNUAL REPORT

158.75

DOCUMENT # P02569

1. Entity Name
IMAGING RESOURCES, INC.



FILED

07 APR 11 PM 2:25

STATE



Principal Place of Business
C/O MEDICAL RESOURCES, INC
1455 BROAD ST., 4TH FLOOR, LEGAL DEPT.
BLOOMFIELD, NJ 07003 US

Mailing Address
C/O MEDICAL RESOURCES, INC
1455 BROAD ST., 4TH FLOOR, LEGAL DEPT.
BLOOMFIELD, NJ 07003 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04022007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

13-3584552

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

400098563584

04/25/07--01022--005 **227.50

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CCEO
STRICKLAND, D. GORDON
1455 BROAD ST., 4TH FLOOR
BLOOMFIELD, NJ 07003



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VCFO
MCCABE, DAVID M
1455 BROAD ST., 4TH FLOOR
BLOOMFIELD, NJ 07003



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCOO
VALLA, JOHN
1455 BROAD ST., 4TH FLOOR
BLOOMFIELD, NJ 07003



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
SHENKMAN, JERROLD
1455 BROAD STREET, 4TH FLOOR
BLOOMFIELD, NJ 07003



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BLEWITT, STEPHEN
1455 BROAD ST., 4TH FLOOR
BLOOMFIELD, NJ 07003

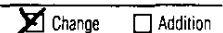


TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MOERE, MORIAN
1455 BROAD ST., 4TH FLOOR
BLOOMFIELD, NJ 07003



11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

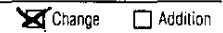
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
STRICKLAND, D. Gordon
1455 Broad St., 4th Floor
Bloomfield, NJ 07003



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



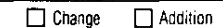
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPCEO
Valla, John
1455 Broad St, 4th Floor
Bloomfield, NJ 07003



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Barry W. Tanner
1455 Broad St
Bloomfield, NJ 07003



12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John Valla

John Valla 4/9/07 941-744-1539

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

x205