

2005 FOR PROFIT CORPORATION ANNUAL REPORT


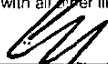
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Apr 15, 2005 8:00 am
Secretary of State

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03162005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000143703					
1. Entity Name ADVANTAGE OPEN MRI OF TAMPA, INC.					
Principal Place of Business 1200 S PINELLAS AVE TARPON SPRINGS, FL 34689			Mailing Address 1200 S PINELLAS AVE TARPON SPRINGS, FL 34689		
2. Principal Place of Business 3104 W. Waters Ave Suite, Apt. #, etc. # 106		3. Mailing Address 1200 S. Pinellas Ave Suite, Apt. #, etc. # 14		4. FEI Number 20-1927426	
City & State Tampa, Florida		City & State Tarpon Springs, Florida		Applied For <input type="checkbox"/> Not Applicable	
Zip 33614	Country Hillsborough	Zip 34689	Country Pinellas	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROTHBURD, CRAIG E 808 W DE LEON STREET TAMPA, FL 33606-2722			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)</small> DATE: _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST SMITH, GARY 1200 S PINELLAS AVE TARPON SPRINGS, FL 34689 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST Gary Smith 1200 S, Pinellas Ave # 14 Tarpon Springs, FL 34689 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LINARDOS, LEONARD 1200 S PINELLAS AVE TARPON SPRINGS, FL 34689 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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12. 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 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: 			3/17/05 727 9392674		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Existing Phone #		