## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000156526

City-St-Zip: LAKE WORTH, FL 33460

Entity Name: ABDONEL X-RAY SERVICES, INC.

FILED Jun 15, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
			New Principal Place C		
228 NOR <sup>.</sup> #1	THCST				
LAKE WO	ORTH, FL 3346	0			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
228 NOR <sup>1</sup>	THCST				
LAKE WO	ORTH, FL 3346	0			
FEI Numbe	r: 20-3848056	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MARC-EL 228 NOR #1	JGENE, ABDOI TH C ST	NEL			
	ORTH, FL 3346	0 US			
	e named entity : te of Florida.	submits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,	
SIGNATU	JRE:				
Electronic Signature of Registered Agent			ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	P ( ) MARC-EUGENI		Title: Name:	()Change ()Addition	

City-St-Zip:

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: ABDONEL MARC EUGENE P 06/15/2008