2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Aug 22, 2014
Secretary of State

DOCUMENT# P07000106074

Entity Name: INTERNATIONAL MEDICAL IMAGING OF AMERICA, INC.

Current Principal Place of Business:

1840 W. 49TH ST.
SUITE # 509
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

1840 W. 49TH ST.
SUITE # 509
HIALEAH, FL 33012 US

New Mailing Address:

FEI Number: 75-3254070 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOPEZ, FAUSTO
1840 W. 49TH ST.
SUITE # 509
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

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: FAUSTO LOPEZ

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: LOPEZ, FAUSTO
Address: 1840 W. 49TH ST. SUITE #509
City-St-Zip: HIALEAH, FL 33012

Title: VPD
Name: PEREIRA, MARIA
Address: 1840 W. 49TH ST. SUITE #509
City-St-Zip: HIALEAH, FL 33012

Title: MGR
Name: SELENE, IBARRA
Address: 8319 NW 142 ST
City-St-Zip: MIAMI LAKES, FL 33016

I hereby 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 all other like empowered.

SIGNATURE: FAUSTO LOPEZ PRES 08/22/2014

Electronic Signature of Signing Officer or Director Date