P09000045081

(Re	equestor's Name)	
(Ad	ldress)	
72-7		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	, <u>.</u>

Office Use Only



900185582149

E. DENNARD
9/2/10

Malave, Erin

From: Vision Imaging Open MRI [vision.openmri@gmail.com]

Sent: Thursday, September 02, 2010 10:42 AM

To: CorpAddressChange

Subject: CHANGE OF ADDRESS - DOC# P09000045081

Please change the PRINCIPAL and MAILING OFFICE ADDRESS of VISION IMAGING

OPEN MRI, Inc to:

4661 Lyons Technology Circle Suite #4 Coconut Creek, FL 33073

Thank you, Dr Peter Reiter

Thank you for your business.

Vision Imaging Open MRI 950 N. Federal Hwy #107 Pompano Beach, FL 33062

Email: vision.openmri@gmail.com

0/0/0010