

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000029876

FILED  
Jul 06, 2004  
Secretary of State

Entity Name: MRI CENTERS OF PALM BEACH, INC.

## Current Principal Place of Business:

5458 TOWN CENTER RD.  
SUITE 24  
BOCA RATON, FL 33486

## New Principal Place of Business:

## Current Mailing Address:

5458 TOWN CENTER RD.  
SUITE 24  
BOCA RATON, FL 33486

## New Mailing Address:

FEI Number: 65-0404342      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ESRIG, KENNETH  
2235 PARKSIDE ST.  
BOCA RATON, FL 33486      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ESRIG, KENNETH  
Address: 2235 PARK SIDE ST  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: ESRIG, MICHELLE  
Address: 2235 PARKSIDE ST.  
City-St-Zip: BOCA RATON, FL 33486

Title: S ( ) Delete  
Name: ESRIG, STEPHANIE  
Address: 2235 PARKSIDE ST  
City-St-Zip: BOCA RATON, FL 33486

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KENNETH N ESRIG

PTD

07/06/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date