2005 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P93000050602						FILE					
PARK DIAGNOSTIC IMAGING CENTER, INC.			{		05		AN 10: 21				
	·			-	SE	CRETARY () 1 5 1 A L				
Principal Place		Mailing Address			TAI	CRETARY (LLAHASSEE	L. FLURIUP	\			
95 HAYDEN AVE ATTN: TAX DEPT. LEXINGTON, MA 02420 US LEXINGTON, MA											
2. Principal P	lace of Business	3. Mailing Address	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03042005	Chg-P	CR2E034 (10/03)				
City & State		City & State		4. FEI Number 65-0433	683	•	-	olied For Applicable			
Zip	Country	Zip	Country	,	<u> </u>	Status Desired	Fee	75 Addi Required			
	6. Name and Address of Current	Registered Agent		Nome	7. Name and A	ddress of New R	legistered Agen	ıt			
CT CORPO	ORATION SYSTEM			Name .							
1200 SOU	TH PINE ISLAND ROAD ON, FL 33324		Street Address (P.O. Box Number is Not Acceptable)								
			-	City			EL I	Zip Code			
A 71 1											
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees											
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFF	ICERS AND DIR	ECTORS	IN 11		
TITLE	AT	☐ Delete	TITLE	,				Change	☐ Addition		
NAME	LIEBERMAN, MARC		NAMÉ								
STREET ADDRESS CITY-ST-ZIP	95 HAYDEN AVE LEXINGTON, MA 02420		CITY-S	ADORESS T_ZIP							
TITLE	D	Delete	TITLE	DP				Change	Addition		
NAME	LIPPS, BEN	Delete	NAME	Ma	ts Wahls	trom		Change	Addition		
STREET ADDRESS	95 HAYDEN AVE		STREET		Hayden A						
CITY-ST-ZIP	LEXINGTON, MA 02420		CITY-S			MA 02420					
TITLE	S	Delete	TITLE	S	_ ,			Change	Addition		
NAME STREET ADDRESS	KEMBEL, DAVID 95'HAYDEN AVE		NAME Street	ADDRESS 0.5	uglas G.	Kott					
CITY-ST-ZIP	LEXINGTON, MA 02420		CITY-S	70	Hayden A						
TITLE	AT	☐ Delete	TITLE		ATTIBE OIL	111 UZ4ZU		Change	Addition		
NAME	COLANTONIO, PAUL		NAME	·			_	-	_		
STREET ADDRESS	95 HAYDEN AVE			ADDRESS	30	00500 0501047)1828	3			
CITY-ST-ZIP	LEXINGTON, MA 02420		CITY-S	1-212	04/06/	05=-01047·			.00		
TITLE NAME	T FAWCETT, MARK	☐ Delete	TITLE				U	Change	☐ Addition		
STREET ADDRESS	95 HAYDEN AVE		•	ADDRESS							
CITY-ST-ZIP	LEXINGTON, MA 02420		CITY-S	T-ZIP							
TITLE		☐ Delete	TITLE					Change	☐ Addition		
NAME			NAME	*DODECC							
STREET ADDRESS			SINEEL	ADDRESS	•						
CITY-ST-ZIP			CITY-S	T-ZIP I							
12. I hereby o	pertify that the information supplied with on this report or supplemental report is	this filing does not qualify for	the exemi	otion stated in Se	ection 119.07(3)(i)	Florida Statutes.	I further certify the	nat the int	formation		

Paul Colantonio 3/18/05 781-402-9000

Daytime Phone #

PARK DIAGNOSTIC IMAGING CENTER, INC.

FEIN 65-0433683

LIST OF OFFICERS AND DIRECTORS EFFECTIVE 05/17/04

DIRECTORS	OFFICE	BUSINESS
MATS WAHLSTROM	DIRECTOR	95 HAYDEN AVENUE LEXINGTON, MA 02420
OFFICERS	OFFICE	BUSINESS
MATS WAHLSTROM	PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
RONALD J. KUERBITZ	SR. VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
ROBERT MCGORTY	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
JOSEPH J. RUMA	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARK FAWCETT	TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
PAUL J. COLANTONIO	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARC S. LIEBERMAN	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
DOUGLAS G. KOTT	SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420