

P94000003926

Requestor's Name

Honestead Imaging Svcs Inc  
 George B Salchberg rd-agent  
 15425 SW 78 Court  
 Miami FL 33157-2342

000002353690--7  
 -11/21/97-01021-005  
 \*\*\*\*\*35.00 \*\*\*\*\*35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

000002353690--7  
 -11/21/97-01021-005  
 \*\*\*\*\*35.00 \*\*\*\*\*35.00

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- Walk in       Pick up time \_\_\_\_\_       Certified Copy  
 Mail out       Will wait       Photocopy       Certificate of Status

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

97 NOV 19 PM 2:56

APPROVED  
 AND  
 FILED

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

P94000003926  
 11-19-97  
 3926

Examiner's Initials	
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FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

November 12, 1997

HOMESTEAD IMAGING SERVICES, INC.  
15425 SW 78TH CT  
MIAMI, FL 33157 US

SUBJECT: HOMESTEAD IMAGING SERVICES, INC.  
Ref. Number: P94000003926

Our records indicate the registered agent for the above named corporation resigned on November 12, 1997 and that the corporation currently does not have a registered agent designated.

Chapter 607, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a corporation for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named corporation 60 days from the date of this letter if a registered agent is not properly designated.

Enclosed is registered agent designation application for you to complete and return with a filing fee of \$35.

If you should need any further information, please contact our office at (850)-487-6050.

Carol Mustain  
Corporate Specialist

RECEIVED  
97 NOV 19 PM 10:02  
DIVISION OF CORPORATIONS

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: HOMESTEAD IMAGING SERVICES INC

2. The mailing address of the corporation is: 15425 SW 78th Court Miami FL 33157-2347

3. Date of incorporation/qualification: Jan 1994 Document number:

4. The name and address of the current registered agent and office:

Capitol Connection 417 East Virginia Street Suite #1 Tallahassee FL 32301

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

George B. Salzberg MD 15425 SW 78th Court Miami FL 33157-2347

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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APPROVED AND FILED

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Signature of an officer, chairman or vice chairman of the board: George B. Salzberg MD Date: 15 Nov 1997

George B. Salzberg MD President (Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Signature of Registered Agent: George B. Salzberg MD Date: 15 November 1997

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)