FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000042658 (2) 1. Corporation Name

X-RAY INNOVATIONS, INC.

Principal Place of Business Maiing Address								 		
6325 EATON STREET 6325 EATON STREET										
HOLLYWOOD FL 33024 US			HOLLYWOOD FL 33024 US				3. Date Incorporated or Qualified 3a. Date of Last Report 06/03/1994 04/28/1995			•
2. Principal Place	of Business	28.	Mailing Address				4. FEI Number	_L		Applied For
7							00 00 10 102			Not Applicable
Suite, Apt. #, etc. City & State			Suite, Apt. #, etc.				5. Certificate of Status Dosired \$8.75 Additiona Fee Required			
			City & State			••	6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country		Zıpı	Coun	try		8. This corporation has liability for		ix under s	199.032,
4	25	29		30			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. □ Na		
1	g. Name and Address of Curre	nt Regis	stered Agent		31	Name	10. Name and Address of New F	Registered	Agent	
LINDENBERG, MARK K ESQ 4700-B SHERIDAN STREET HOLLYWOOD FL 33021				[1	вэ		DIXON, JEANNAE R ess (P.O. Box Number is Not Acceptal 1510 N. DIXIE HW	Y. —	85 Zi	p Code
11. Pursuant to or registered familiar with,	the provisions of Sections 607.050 diagent, or botth, in the State of Fic and accept the boligations of Se	02 and 60 oridal Suc ction 607	27 1508, Florida Statut di cha de was authoriz onda starida Statica)		/	TLYWOOD ration submits this statement for the pured of directors. I hereby accept the app	FL irpose of choointment as	anging its is registered	3020 registered offic Lagent, Lani
	granue typos de productione objection Lag- OFHICERS A			11. 17. 17. 17. 13.	4,600	allegate reduit	ADDITIONS/CHANGES TO OF	DATE		DRS IN 12
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	TARULLI, JOSEPH			1.2 NA	ΜE					
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STREET ADDRESS	HOLLYWOOD FL			1400						
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			<u>.</u>	62 N	AME		-08/07/960	1046	012	
NAME				1		I ADDRESS	***225.00			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that the information indicated on this arinual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: __

STREET ADDRESS

CITY ST-ZIP

A Result Com Joseph R. Tarulli Pres 7/12/86 305-961-0848

6.4 CITY S1-7IP

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