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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

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E ROBERT EN REGER EN FRANCE BEREIT BEREI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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MAGNETIC IMAGING SUPPLIES, INC.

Dens nel Dise	s of December	Marian Address	~~~				Marit Balte Balte		FOIGE OFFID LOL	
Principal Place of Business 1825 PONCE DE LEON 257		-	Mailing Address 3121 ANDERSON RD CORAL GABLES FL 33134-8578							
CORAL GABLE US				3. Date Incorporated or Qualified 3a. Date of Last Re. 08/11/1994 08/22/1996				eport		
	lace of Business	2a. Mailing Address			********	4, FEI Number 65-0511175	.,			oplied For
Suite, Apt	# etc.	Suite, Apt. #, etc.				<u> </u>	· ····································			ot Applicable Additional
22]	., 010	27				Certificate of Status	Desired			equired
City & State	9	City & State				6. Election Campaign	Financing		\$5.00	May Be
23]		28				Trust Fund Contribu				to Fees
Zip 24]	Country	Zip	<u>├</u>	untry		6. This corporation has Florida Statutes		ntangible] Yes = [i. 1 9 9.032,
29]	25 g. Name and Address of Cui	29 rrent Registered Agent	30	T		10. Name and Address				
GIB	BONS, JOSEPH A	***************************************		81	Name			· · · · · · · · · · · · · · · · · · ·		
	ANDERSON RD			82	Street Add	Iress (P.O. Box Number is N	ot Accentab	le)		
COP	PAL GABLES FL 33134				0.,00171.00	TOO (TO DO NOT A TO TO	ot riboopias	,		
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office or r	to the provisions of Sections 607, egistered agent, or both, in the S m familiar with, and accept the ob	late of Fiorida. Such change w	vas authorize	o by	the corpora	ition's board of directors. I h	ereby accep	the app	ointment as	registered
	nt fatimat with, and accept the or	ongations or, Section 607.0505	o, Fiorida Sia	llutes	•					
SIGNATURE	Signature, typied or printed name of registered	d agast and tale it analysable						DATE		
		a agont a la tree il applicable	[NOTE: Registera	d Ager	nt signature requi	ired when reinstating)		DATE		
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	D		13.		nt signature requi		S TO OFFIC	ERS AND	DIRECTO!	
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