

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P94000076229

Entity Name: ULTRA MOBILE X-RAYS, INC.

FILED  
Dec 19, 2007  
Secretary of State

## Current Principal Place of Business:

10100 N.W. 116 WAY  
SUITE 18  
MEDLEY, FL 33178

## New Principal Place of Business:

## Current Mailing Address:

10100 N.W. 116 WAY  
SUITE 18  
MEDLEY, FL 33178

## New Mailing Address:

FEI Number: 65-0534136

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERNANDEZ, ESTEBAN R  
10100 NW 116 WAY  
SUITE 18  
MEDLEY, FL 33178 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

## OFFICERS AND DIRECTORS:

Title: PVS ( ) Delete  
Name: HERNANDEZ, ESTEBAN R  
Address: 10100 NW 116 WAY SUITE 18  
City-St-Zip: MEDLEY, FL 33178

Title: D ( ) Delete  
Name: HERNANDEZ, ESTEBAN R  
Address: 10100 NW 116 WAY SUITE 18  
City-St-Zip: MEDLEY, FL 33178

Title: D ( ) Delete  
Name: HERNANDEZ, ESTEBAN J  
Address: 10100 NW 116 WAY SUITE 18  
City-St-Zip: MEDLEY, FL 33178

Title: T ( ) Delete  
Name: LOPEZ, JORGE L  
Address: 10100 NW 116 WAY SUITE 18  
City-St-Zip: MEDLEY, FL 33178

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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:

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

Title: S ( ) Change (X) Addition  
Name: PALMER, SCOTT  
Address: 10100 NW 116 WAY SUITE 18  
City-St-Zip: MEDLEY, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JORGE L. LOPEZ

T

12/19/2007

Electronic Signature of Signing Officer or Director

Date