

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000089049

Entity Name: M R IMAGING SERVICES, INC.

FILED
Jul 31, 2005
Secretary of State

Current Principal Place of Business:

200 S. INDIAN RIVER DRIVE
SUITE 319
FT. PIERCE, FL 34950 US

Current Mailing Address:

P.O. BOX 9615
PORT ST. LUCIE, FL 34985 US

New Principal Place of Business:

2401 FRIST BLVD
SUITE 10
FT. PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 65-0545134 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANTON, CARL D
498 SW COPPERFIELD AVE
PORT ST. LUCIE, FL 34953 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BLANTON, CARL D
Address: 200 S INDIAN RIVER DR
City-St-Zip: FT. PIERCE, FL 34950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CARL, BLANTON D
Address: 2401FRIST BLVD STE 10
City-St-Zip: FT. PIERCE, FL 34950

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARL D BLANTON

PRES

07/31/2005

Electronic Signature of Signing Officer or Director

Date