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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS\*

1996

SIGNATURE:

DOCUMENT #
1. Corporation Name

P95000035762 (0)

PALMETTO MEDICAL IMAGING, P.A.

	•			
Principal Place	of Business	Mailing Address		
1131 SE 2 AVE FT LAUDERDALE FL 33316		1131 SE 2 AVE FT LAUDERDALE FL	33316	
				3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995
	ice of Business	2a, Mailing Address		4. FEI Number Applied For
i]		26		45-0577062 Not Applicable
Suite. Apt. #	o, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
		28		Trust Fund Contribution Added to Fees
- Ζφ 	Country [25]	Zip 29]	Country 30	<ol> <li>This corporation has liability for intangible tax under s 199.032,</li> <li>Florida Statutes</li> <li>Yes □ No</li> </ol>
I	9. Name and Address of Curre			10. Name and Address of New Registered Agent
	***		81 Name	
RUSH, E	Brian P		82 Street Add	dress (P.O. Box Number is Not Acceptable)
	DALE MABRY			JIESS (1.50) DON HORIBOT IS NOT NOCOPILABLE)
SUITE 4			83	
TAMPA I	FL 33618		84 City	B5 Zip Code
_F				oration submits this statement for the purpose of changing its registered office
tantilar witi GNATURE	od agent, or both, in the State of Flor n, and accept the obligations of, Sec Agrature typed or printed name of registeres agen		S.  OTE: Registered Agent signature require	no when rainstating! DATE
Tamiliar with	n, and accept the obligations of, Sec Synthemographic printed national displaces age OFFICERS AN	rtandukifaj jikane (N ND DIRECTORS	OTE: Registered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Dete Deytile Proce