2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P95000072462 Apr 11, 2001 8:00 am Secretary of State MG Imaging Corporation 04-11-2001 90085 045 ***158.75 Principal Prace of Business 1596 JE Federal Highway 321 Ridge Rd. Stuart, Fl. 34994 Supiter, Fl. 33477 10045906 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 5-0616628 No: Applicable Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Greenberg, Mark Street Address (P.O. Box Number is Not Acceptable) 321 Rrdge Rd. Jupiter, FL. 33477 Zio Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 !ax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See or teria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Addition Greenberg, Mark. Change ☐ Delete TITLE STREET ADDRESS STREET ADDRESS 321 Ridge Rd. Jupiter, Fl. 33477 Citty-ST-ZIP CITY ST-ZIP TiTi E NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY ST ZIP ☐ Change Addition 1018 ☐ Delete This. NAME VAME STREET ADDRESS STREET ADDRESS C:TY - ST - 71P 0117-ST-71P Add tien TITLE Delete TITLE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P ☐ Change Addition TITLE ☐ Delete TITLE NAME NAM6 STREET ADDRESS STREET ADDRESS CITY-ST-7.P DITY - ST- ZV Change Acdition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby certify that the information supplied with this filling does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered