

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000078739 (6)**

1. Corporation Name

NORTH COUNTY IMAGING, P.A.



Principal Place of Business

**505 SOUTH FLAGLER DRIVE
SUITE 1330
WEST PALM BEACH FL 33401**

Mailing Address

**505 SOUTH FLAGLER DRIVE
SUITE 1330
WEST PALM BEACH FL 33401**

3. Date Incorporated or Qualified

10/13/1995

3a. Date of Last Report

2. Principal Place of Business

21 2801 Exchange Court

2a. Mailing Address

26 P.O. Box 32939

4. FEI Number

65-0621533

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

Suite, Apt. #, etc.

City & State

23 West Palm Beach, FL

Zip

24 33409

Country

25 USA

Suite, Apt. #, etc.

City & State

28 Palm Beach Gardens, FL

Zip

29 33420

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DUBOIS, SILVIA R
505 SOUTH FLAGLER DRIVE
SUITE 1330
WEST PALM BEACH FL 33401**

81 Name

Richard Sarner, M.D.

82 Street Address (P.O. Box Number is Not Acceptable)

2801 Exchange Court

83

84

City West Palm Beach,

FL

85 Zip Code
33409

14. Pursuant to the provisions of Sections 607.0132 and 607.0138, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. If the change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Sections 607.0132 and 607.0138, Florida Statutes.

SIGNATURE

Richard C. Sarner MD **RICHARD SARNER, M.D.**

DATE

4/30/96

12. OFFICERS AND DIRECTORS

☐ DELETE

**1 D
NAME WILBUR, NILA M.D.
STREET ADDRESS 505 SOUTH FLAGLER DRIVE, SUITE 1330
CITY-ST-ZIP WEST PALM BEACH FL 33401**

☐ DELETE

**2 D
NAME HOGHOOGHI, IRAN M.D.
STREET ADDRESS 505 SOUTH FLAGLER DRIVE, SUITE 1330
CITY-ST-ZIP WEST PALM BEACH FL 33401**

☐ DELETE

**3 D
NAME SARNER, RICHARD M.D.
STREET ADDRESS 505 SOUTH FLAGLER DRIVE, SUITE 1330
CITY-ST-ZIP WEST PALM BEACH FL 33401**

☐ DELETE

**4
NAME
STREET ADDRESS
CITY-ST-ZIP**

☐ DELETE

**5
NAME
STREET ADDRESS
CITY-ST-ZIP**

☐ DELETE

**6
NAME
STREET ADDRESS
CITY-ST-ZIP**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

**1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 13750 Prosperity Farms Road
1.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410**

☒ Change ☐ Addition

**2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 100 Bow Sprit Drive
2.4 CITY-ST-ZIP North Palm Beach, FL 33408**

☒ Change ☐ Addition

**3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS 168 Commodore Drive
3.4 CITY-ST-ZIP Jupiter, FL 33477**

☐ Change ☒ Addition

**4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS Toro, Jaime, M.D.
4.4 CITY-ST-ZIP 1 Balfour Court
Palm Beach Gardens, FL 33418**

☐ Change ☐ Addition

**5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS 400001838354
5.4 CITY-ST-ZIP -05/24/96--01035--001
***200.00**

☐ Change ☐ Addition

**6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 recorder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

4-9-96 407-622-6235

Daytime Phone

CR2E034 (12/95)